



2009 Chesapeake Bay Area Combined Federal Campaign
 P.O. Box 1576, Baltimore, MD 21203-1576

CFC
Campaign No. 0405

ATTENTION PAYROLL OFFICES:
 Only use this number to identify the local campaign.

PRINT NAME (LAST)	FIRST	MIDDLE INITIAL	CHECK (if applicable) <input type="checkbox"/> Civilian <input type="checkbox"/> Military	FEDERAL AGENCY AND OFFICE	SOCIAL SECURITY NUMBER/EMPLOYEE ID
WORK ADDRESS & ZIP CODE					WORK PHONE ()

PLEASE USE BALL POINT PEN & WRITE FIRMLY

CONTRIBUTION: Fill in the blank showing the amount of your payroll allotment, cash or check contribution. Write in the total of your annual contribution in the space provided.				CHARITY CODE	ANNUAL AMOUNT
ALLOTMENT SOURCE	AMOUNT	INTERVAL	TOTAL GIFT		
MILITARY PAYROLL Branch of Service? _____		X 12 months	\$		
CIVILIAN PAYROLL		X 26 pay periods	\$		
Cash/Check Amount: \$ _____ Check Number: _____			Date of Contribution: _____		
<i>(make check payable to the Combined Federal Campaign)</i>					

CFC organizations do not provide goods or service in whole or partial consideration for any contributions made to the organizations via this pledge card.

DESIGNATED GIFT: To designate one or more charities or federated groups, fill in the charity code(s) and dollar amounts above.

COPY #1 - PAYROLL OFFICE

RECOGNITION OPTIONS

Only checked options will be processed.

Address information is required to receive an acknowledgement from the charity

My check-mark(s) and completed information below authorize the CFC to release my name and the corresponding information to my designated charities.

Pledge Amount: _____

Home Address: _____

Home E-mail: _____

I wish to receive the recognition gift applicable to the level of my pledge.
 Photos of donor recognition gifts are available on our campaign website, www.cbacfc.org.

PAYROLL DEDUCTION AUTHORIZATION

I hereby authorize any agency of the United States Government by which I may be employed during 2010 to deduct the amount(s) shown above from my pay each pay period during the calendar year 2010 starting with the first pay period that begins in January and ending with the last pay period that begins in December, and to pay the amounts so deducted to the Combined Federal Campaign shown above. I understand that this authorization may be revoked by me in writing at any time before it expires.

SIGNATURE _____ DATE _____

See reverse side for information on volunteer opportunities in your community.

CAMPAIGN SERVICE CENTER (801) 274-7500

www.campaignservice.com



Printed on recyclable paper



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COPY #2 - TO THE CENTRAL RECEIPT POINT



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CFC
 Campaign No. **0405**

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WORK ADDRESS & ZIP CODE					WORK PHONE ()

CONTRIBUTION: Fill in the blank showing the amount of your payroll allotment, cash or check contribution. Write in the total of your annual contribution in the space provided.				CHARITY CODE		ANNUAL AMOUNT	
ALLOTMENT SOURCE	AMOUNT	INTERVAL	TOTAL GIFT				
MILITARY PAYROLL Branch of Service? _____		X 12 months	\$				
CIVILIAN PAYROLL		X 26 pay periods	\$				
Cash/Check Amount: \$ _____		Check Number: _____		Date of Contribution: _____			
<small>CFC organizations do not provide goods or service in whole or partial consideration for any contributions made to the organizations via this pledge card.</small>				<small>DESIGNATED GIFT: To designate one or more charities or federated groups, fill in the charity code(s) and dollar amounts above.</small>			

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COPY #3 - CONTRIBUTOR - KEEP FOR PERSONAL TAX RECORDS

PRIVACY NOTICE

Executive Order No. 12353 authorizes the U.S. Office of Personnel Management to conduct fund raising activities and to establish procedures for collecting information related to such activities.

Executive Order 9397 (November 22, 1943) authorizes the use of the Social Security Number (SSN). This collected information will be disclosed to organizations maintaining the accounting of contributions and to your payroll office.

Additional disclosure may be made to the Department of Treasury to make proper financial adjustments to a court or another agency when the government is party to a suit; and to the Internal Revenue Service and state and local taxing authorities regarding income tax returns.

The furnishing of the SSN, along with other data requested, is voluntary. However, failure to furnish any of the requested information may result in errors or noncompliance with your request for a payroll deduction by your agency.

If you are making a one-time, lump-sum gift and, therefore, not using the payroll deduction method of payment, you are not required to furnish your SSN.

Find a Volunteer Opportunity

The USA Freedom Corps Volunteer Network can help you access service opportunities near your home or office, across the country, or overseas. Just go to www.volunteer.gov, enter geographic information, such as zip code or state, and your area of interest to find out how you can get involved.