SAMPLE

Pledge Card

where do we take this for payroll entry?

Will NOT be shared w. charity; only for clarification for allotments

Quantico CFC
P.O. Box 398, Fredericksburg, VA 22404

OPM
CFC Control No. 0898

ATTENTION PAYROLL OFFICES:
This number identifies the local CFC.
DO NOT enter into federal payroll systems.

PRINT NAME (LAST)	FIRST	MIDDLE INITIAL	☒ CIVILIAN ☐ MILITARY	FEDERAL ORGANIZATION	UNIT/DIVISION OR PAYROLL OFFICE
SAMPLE	John	P		MCB G-1	Lejeune Hall Payroll

WORK ADDRESS & ZIP CODE	WORK PHONE	SOCIAL SECURITY NUMBER
Bldg 2007, Quantico	784-2181	123 45 6789

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

CONTRIBUTION	AMOUNT	INTERVAL	TOTAL GIFT	FOUR DIGIT AGENCY CODE	ANNUAL AMOUNT
MILITARY PAYROLL	minimum $2/mo ($1 per period)	X 12 months	$	9999	200
CIVILIAN PAYROLL	$10	X 26 pay periods	$ 260	8888	160
Other $_____ (cash/check payable to CFC)					

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

DESIGNATED GIFTS: To designate one or more charities or federal groups that appear on the list provided, fill in the charity or federation identification number(s) and dollar amounts here:

PLEASE CHECK ONE BOX

☐ **I do want my name and address released to the voluntary organization(s) I have designated. MY HOME ADDRESS IS: (My name will not be released unless this box is filled out completely.)**

STREET _____

CITY _____ **STATE** _____ **ZIP CODE** _____

☐ **I do want my home e-mail address released to the voluntary organization(s) I have designated. My Home e-mail address is:** _____

☒ **I do not want my name and address released to the voluntary organization(s) I have designated.**

PAYROLL DEDUCTION AUTHORIZATION

I hereby authorize any agency of the United States Government by which I may be employed during 2003 to deduct the amount(s) shown above from my pay each pay period during the calendar year 2003 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** 10/15/04

*** - Pledge only to agencies in the Quantico book; each region's book is different!!!**

*** - Donors may designate to more than five agencies, but must fill out additional card(s)**

*** - Payroll Deduction must be a minimum of $1.00 per pay period (military: $2/ month)**