



**CONTRIBUTION  
PLEDGE FORM**

**2014**

**LINCOLN & LANCASTER COUNTY AREA  
COMBINED FEDERAL CAMPAIGN**

[www.cfclincoln.org](http://www.cfclincoln.org)

Facebook: Lincoln and Lancaster County Area CFC

Many lives in our local area and around the world are positively affected through your contributions to the Combined Federal Campaign. Giving to the CFC is a very personal decision. Only you, as a contributor, can decide how much to give, but please remember every donation counts!

**Please consider being a part of  
“Neighbor Helping Neighbor”**  
by donating at least \$1 per pay period.

Some of the people and organizations that your CFC donations have helped in the Lincoln and Lancaster County Area are posted on our campaign website at:

[www.cfclincoln.org](http://www.cfclincoln.org)

Other information in the website includes:

- Upcoming Events and Dates
- General Information About the CFC
- Links to Various Charitable Organizations
- Latest CFC Newsletter
- 2014 Goals
- 2014 Charity List
- 2014 Campaign Information
- 2013 Campaign Results
- Your Local Federal Coordinating Committee and Officers

Please turn in your completed pledge form to the Key Worker or Coordinator for your agency.

**ALL DONORS WILL RECEIVE A SMALL  
TOKEN OF OUR APPRECIATION FOR  
YOUR DONATION.**

**THANK YOU!**



PLEASE USE BALL POINT PEN & WRITE FIRMLY



**Lincoln and Lancaster County Area CFC**  
238 S. 13th Street • Lincoln, NE 68508

City/State Code  
**31 2830**

CFC Campaign No.  
**0551**

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

PRINT NAME (LAST)	FIRST	MIDDLE INITIAL	<input type="checkbox"/> CIVILIAN <input type="checkbox"/> MILITARY	FEDERAL AGENCY AND OFFICE	SSN/EMPLOYEE ID [REDACTED]
WORK ADDRESS & ZIP CODE			BRANCH OF MILITARY SERVICE	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.

ALLOTMENT SOURCE	AMOUNT	INTERVAL	TOTAL GIFT
MILITARY PAYROLL		X 12 months	
CIVILIAN PAYROLL		X 26 pay periods	
Cash/Check\$ _____ Check Number _____ (Make check payable to the Combined Federal Campaign)			
Date of Contribution _____			

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

**INFORMATION RELEASE (OPTIONAL)**

Any information you enter below will be released, along with your name, to the charity(ies) to which you made a pledge. Do not enter your work address or email.

Home Address \_\_\_\_\_

Personal E-mail Address \_\_\_\_\_

In addition to my contact information, I authorize the CFC to release the amount of my pledge to the charity(ies) I designated above.

**Charity Code**

**Annual Amount**

					-	\$
					-	\$
					-	\$
					-	\$
					-	\$

DESIGNATED GIFTS: To designate to one or more charities or federated groups, fill in the charity code(s) and dollar amount(s) above. Undesignated gifts are distributed among all organizations in proportion to their pledges.

**PAYROLL DEDUCTION AUTHORIZATION**

I hereby authorize any agency of the United States Government by which I may be employed during 2015, to deduct the amount(s) shown above from my pay each pay period during the calendar year 2015, 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 the authorization may be revoked by me in writing at any time before it expires.

Signature \_\_\_\_\_ Date \_\_\_\_\_

COPY #2 For Central Receipt Point



## PRIVACY ACT NOTICE

Executive Order number 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.

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