

1		2	3	4	5
SOCIAL SECURITY NUMBER		EMPLOYEE NAME	AGENCY	UNIT	CURRENT PCFD CODE #

NEED HELP FILLING OUT THIS FORM?
 → SEE BACK. →

PLEASE TYPE OR PRINT LEGIBLY, USING A BALL POINT PEN.
 NOTE: YOUR **PCFD** IS THE ENTITY THAT WILL MANAGE YOUR FUNDS. SEE BACK FOR A LIST OF CALIFORNIA PCFDs.

CSECC PLEDGE FORM



CALIFORNIA GOVERNMENT CODE §13923 REQUIRES THAT EVERY STATE EMPLOYEE RECEIVE THIS PLEDGE FORM. YOUR SIGNATURE ON LINE F OR INITIALS ON LINE H WILL VERIFY THAT THIS REQUIREMENT HAS BEEN MET.

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR TAX RECORDS.

SET UP A NEW ONGOING PAYROLL DEDUCTION

A. **NEW PAYROLL DEDUCTION**
 See back of form to select your PCFD, the entity that will manage your contributions.

6		7	\$
PCFD CODE # (REQUIRED)		MONTHLY CONTRIBUTION \$5 MINIMUM	

← **OR** →

CHANGE AN EXISTING ONGOING PAYROLL DEDUCTION

B. **CHANGE MY EXISTING DEDUCTION AMOUNT**
 Selecting this option CANCELS your existing deduction and contribution to your selected charitable organization(s). To re-designate, please complete section I below and sign and date line K.

8	\$
MONTHLY CONTRIBUTION \$5 MINIMUM	

C. **DELETE. I NO LONGER WISH TO CONTRIBUTE.** Funds will no longer be deducted.

D. **CHANGE MY PCFD** (See back of form for list)
 Selecting this option CANCELS your existing deduction and contribution to your selected charitable organization(s). To re-designate, please complete section I below and sign and date line K.

9		10	\$
PCFD CODE # (REQUIRED)		MONTHLY CONTRIBUTION \$5 MINIMUM	

E. **CONTINUE MY EXISTING DEDUCTION**
 Your existing monthly payroll deduction will remain the same. The organization(s) you contribute to will remain as previously directed unless you change them in section I below.

G. **THIS IS A ONE-TIME GIFT FOR THE TOTAL AMOUNT OF:** \$ _____

Please make check payable to **CSECC**. For designations, complete Section I below and sign and date line K.

H. **DECLINE. I HAVE NO CURRENT DEDUCTIONS AND DO NOT WISH TO CONTRIBUTE AT THIS TIME.**

▶ _____ INITIAL

PLEASE NOTE: If you have an existing deduction, you must delete. See back of form for instructions.

SIGN HERE TO AUTHORIZE YOUR PAYROLL DEDUCTION

F. I AUTHORIZE THE **STATE CONTROLLER** TO PROCESS THE PAYROLL DEDUCTION SELECTION LISTED ABOVE.

▶ _____
 SIGNATURE REQUIRED (INK ONLY) DATE

OPTIONAL SECTION You have the right to designate all or part of your contribution to the charitable organization(s) of your choice. Any undesignated portion will be invested in local programs and services by the PCFD managing your funds.

I. I WISH TO MAKE THE FOLLOWING DESIGNATION(S):

ORGANIZATION NAME	ORGANIZATION CODE #	AMOUNT PER MONTH \$5 MINIMUM PER ORGANIZATION
1		\$
2		\$
3		\$

WRITE-IN ORGANIZATION : Designate to an organization that is not approved by the Victim Compensation and Government Claims Board, but is a 501(c)(3) nonprofit organization

(REQUIRED) ORGANIZATION NAME	AMOUNT DESIGNATED FOR WRITE-IN ORGANIZATION:	\$
(REQUIRED) ADDRESS		
(REQUIRED) CITY/STATE/ZIP	TOTAL ALL MONTHLY DESIGNATIONS	\$
PHONE NUMBER TAX I.D. #		

J. I WISH TO HAVE THE PCFD ACKNOWLEDGE MY DONATION.
 Acknowledgement information must be provided on an annual basis. If this section is not completed, you will be considered anonymous.

PREFERRED NAME(S) FOR RECOGNITION (IF DIFFERENT THAN ABOVE)

HOME ADDRESS CITY/STATE/ZIP

PHONE EMAIL

K. I AUTHORIZE THE PCFD TO DISTRIBUTE MY CONTRIBUTIONS AS STATED ABOVE. ▶ _____
 SIGNATURE REQUIRED (INK ONLY) DATE

L. I HAVE BEEN GIVING SINCE _____ (YEAR). If you've been giving for more than 10 years, you are a loyal contributor. Visit www.csecc.org for more information.

M. I CURRENTLY VOLUNTEER. For more opportunities in your community, visit www.californiavolunteers.org.

➔ NEED HELP? PAYROLL DEDUCTION INSTRUCTIONS

SET UP A NEW ONGOING PAYROLL DEDUCTION:

- Provide your SSN in box 1.
- Select item A.
- Fill in boxes 6 and 7.
- Sign and date on line F.

OPTIONAL:

- Make designations to specific organizations in section I.
- If desired, fill out Section J to release your acknowledgement information to the organization(s) of your choice.
- Sign and date on line K.

CHANGE MY EXISTING DEDUCTION AMOUNT:

- Provide your SSN in box 1.
- Select item B.
- Fill in box 8.
- Sign and date on line F.

OPTIONAL:

- Make designations to specific organizations in section I.
- If desired, fill out Section J to release your acknowledgement information to the organization(s) of your choice.
- Sign and date on line K.

DELETE MY EXISTING DEDUCTION:

- Provide your SSN in box 1.
- Select item C.
- Sign and date on line F.

CHANGE MY PCFD:

- Provide your SSN in box 1.
- Select item D.
- Fill in boxes 9 and 10.
- Sign and date on line F.

OPTIONAL:

- Make designations to specific organizations in section I.
- If desired, fill out Section J to release your acknowledgement information to the organization(s) of your choice.
- Sign and date on line K.

CONTINUE MY EXISTING DEDUCTION:

- Provide your SSN in box 1.*
- Select item E.
- Sign and date on line F.

*PLEASE NOTE: If you are not making ANY changes to your current deduction, NO SSN is needed. However, if you are changing your designated organizations and/or providing acknowledgement information, SSN **MUST** be provided.

Looking for a charitable organization to give to? Visit www.csecc.org.

PRINCIPAL COMBINED FUND DRIVE (PCFD) ORGANIZATION CODE NUMBERS

To be used when a PCFD code number is needed on the form.

PCFD CODE	PCFD ORGANIZATION	AREA SERVED
045	Arrowhead United Way	Big Bear, Bloomington, Crestline, Colton, Devore, Grand Terrace, Highland, Lake Arrowhead, Loma Linda, Rialto, Running Springs, San Bernardino and Mojave Valley Region
011	Central County United Way	Hemet, San Jacinto, Menifee, Winchester, Homeland, Romoland, Sun City, Anza, Aguanga, Sage and Idyllwild
069	Desert Communities United Way	Adelanto, Apple Valley, Baldy Mesa, El Mirage, Helendale, Hesperia, Indian Wells, Lucerne Valley, Oak Hills, Oro Grande, Phelan, Pinon Hills, Summit Valley, Victorville and Wrightwood
059	Inline Empire United Way	Eastern Los Angeles and Western San Bernardino Counties including: Claremont, Diamond Bar, La Verne, Pomona, San Dimas, Walnut, Chino, Chino Hills, Fontana, Montclair, Ontario, Lytle Creek, Upland, Rancho Cucamonga and Mt. Baldy
014	Kings United Way	Kings County
013	Nevada County United Way	Nevada and Sierra Counties
005	Orange County United Way	Orange County
003	Palo Verde United Way	Palo Verde Valley, Blythe in Eastern Riverside County
024	United Way California Capital Region	Alpine, Amador, El Dorado, Placer, Sacramento, Santa Barbara and Yolo Counties
036	United way Monterey County	Monterey County
028	United Way of Fresno County	Fresno, Madera and Mariposa Counties
004	United Way of Greater Los Angeles	Los Angeles County, excluding: Diamond Bar, Pomona, San Dimas and Walnut
002	United Way of Imperial County	Imperial County
071	United Way of Kern County, Inc.	Kern, Inyo and Mono Counties
056	United Way of Merced County	Merced County
040	United Way of Northern California	Butte, Glenn, Lassen, Intermountain Area, Shasta, Siskiyou, Tehama, Trinity, Modoc and Plumas Counties
032	United Way of San Diego	San Diego County
023	United Way of San Joaquin County	San Joaquin County
039	United Way of San Luis Obispo County	San Luis Obispo County
012	United Way of Stanislaus Area	Stanislaus, Tuolumne and Calaveras Counties
022	United Way of the Bay Area	Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo and Solano Counties
064	United Way of the Desert	Coachella Valley: Palm Springs, Cathedral City, Desert Hot Springs, Rancho Mirage, Palm Desert, La Quinta, Indio, Coachella, Mecca, Sky Valley, Eagle Mountain and North Shore San Bernardino County: Morongo, Yucca Valley, Joshua Tree and Twentynine Palms
065	United Way of the East Valley	Redlands, Mentone, Yucaipa, Calimesa, Forest Falls and Oak Glen
019	United Way of the Inland Valleys	Banning, Beaumont, Cabazon, Cherry Valley, Glen Avon, Jurupa, Miro Loma, Pedley, Rubidoux, Lake Elsinore, Canyon Lake, Wildomar, March Field, Moreno Valley, Perris, Temecula, Murrieta, Riverside, Corona, Norco, El Cerrito, Home Gardens, Lake Matthews and surrounding county land
073	United Way of the Wine Country	Del Norte, Humboldt, Lake, Mendocino and Sonoma Counties
081	United Way of Tulare County	Tulare County
010	United Way of Ventura County	Ventura County
029	United Way Silicon Valley	Santa Clara, Santa Cruz and San Benito Counties
075	Yuba-Sutter United Way	Yuba, Sutter and Colusa Counties