



**2025 Commonwealth of Virginia Campaign
INDIVIDUAL EMPLOYEE PAPER PLEDGE FORM**

State Agency Name:

Agency Code:

Employee ID Number:

Department/Work Unit:

Employee Name:

**STEP 1: Please complete the information to state the amount of your payroll deduction pledge.
Do not use this form when making an online donation.**

Payroll Deduction Pledge: Choose the total amount you'd like to donate for the year. This amount will be divided evenly across your pay periods and deducted post-tax from January through December.

Example: A \$240 total pledge equals a \$10 deduction each pay period.

\$ _____ per 24 pay periods (semi-monthly) = \$ _____

STEP 2: Choose whether you wish to designate your gift to a specific charity. Consult the CVC Charity List at www.cvc.virginia.gov or see your CVC Coordinator for designation codes. There are over 700 charities needing your help.

I do not wish to designate my gift. (All undesignated gifts are donated to the Virginia State Employee Assistance Fund (VSEAF). More information can be found here: <https://www.dhrm.virginia.gov/vseaf>

I wish to designate my gift as follows (for more than four designations, attach additional forms):

CVC Code	Name of Charity	Annual Amount
		\$
CVC Code	Name of Charity	Annual Amount
		\$

CVC Code	Name of Charity	Annual Amount
		\$
CVC Code	Name of Charity	Annual Amount
		\$

STEP 3: Authorize your donation and choose whether you wish to be acknowledged.

I wish for my gift to be anonymous *OR*

Please share my name, address, and amount of gift with the charities I have selected for acknowledgement purposes. I am providing my mailing address for this purpose:

Mailing Address:

By signing below, I authorize this contribution to the CVC.

Employee Signature

Date

STEP 4: Please create two copies of this form. Keep one for your tax records and send a copy to your CVC Coordinator, who will deliver it to the CVC for recording.