

2017 San Francisco Combined Charities Campaign

Last Name _____ First Name, MI _____ Dept # _____ Department Name _____ DSW Number

Street Address _____ City _____ Zip _____

Email Address _____ Work Phone Number _____

I would like to remain anonymous. Page ____ of ____
 I would like an acknowledgment of my donation.








Employee Signature _____

PER PAY PERIOD
 \$20 x 26 Pay Periods = \$520 \$10 x 26 Pay Periods = \$260
 \$ 5 x 26 Pay Periods = \$130 \$ _____ x 26 Pay Periods = \$ _____

ONE TIME DONATION BY CHECK
 All checks must be made payable to a Federation. For Write-In Charity agencies, see 6 and 7 on back of form. NOTE: Checks to Write-In Charities must be made payable to America's Best Local Charities or they will be returned. Attach your check(s) to this form.

Total Payroll Deduction Contribution \$ _____
 Total One Time Check Contribution \$ _____
TOTAL ANNUAL GIFT \$ _____
 \$500 = Leadership Giver

All Checks MUST Be Made Payable Directly to a Federation, Not an Individual Agency

Code	Agency Name	Annual Gift	Total Pledge to Federation & Affiliates
 L2000 America's Best Local Charities Processing Fee 1.6%	_____	\$ _____	\$
	_____	\$ _____	
	_____	\$ _____	
 A800 Asian Pacific Fund Processing Fee 9%	_____	\$ _____	\$
	_____	\$ _____	
	_____	\$ _____	
 100 Bay Area Black United Fund Processing Fee 14%	_____	\$ _____	\$
	_____	\$ _____	
	_____	\$ _____	
 999 Community Health Charities Processing Fee 15%	_____	\$ _____	\$
	_____	\$ _____	
	_____	\$ _____	
 A-001 EarthShare California Processing Fee 14.3%	_____	\$ _____	\$
	_____	\$ _____	
	_____	\$ _____	
 10187 Global Impact Processing Fee 11%	_____	\$ _____	\$
	_____	\$ _____	
	_____	\$ _____	
 United Way Bay Area Processing Fee 15%	_____	\$ _____	\$
	_____	\$ _____	
	_____	\$ _____	

WRITE-IN CHARITY (Donor's Choice): See Pledge Form Guidelines (5C) on the back of this form before completing this section. To designate to an agency not listed, please enter your choice and provide the contact information in this section. All Write-In Charities donations are subject to an 11% administrative fee and must be made payable to America's Best Local Charities.

Agency _____ Tax ID Number: _____
 Address _____
 City/State _____ Zip _____ Phone _____ \$

Agency _____ Tax ID Number: _____
 Address _____
 City/State _____ Zip _____ Phone _____ \$

Pledge Form Guidelines






1. **Decide to whom you wish to give and how much to each.** Refer to the brochure for information about the Federations, their affiliated organizations, and their code numbers. Decide if you will give an annual payroll deduction and/or a one-time donation.
2. **Fill out your name, department number, department name and work phone number.** This will allow us to contact you if we have any questions
3. **Fill in your DSW#.** Your DSW is required for payroll deduction.
4. **Sign the form.** Your signature is required for payroll deduction.
5. **Acknowledgment** – To receive a thank you for your donation to a Federation or agency, complete the portion of the form above your signature with a legible, email or mailing address and check the appropriate box indicating that, “I would like to receive an acknowledgment of my donation”. To remain anonymous, please check the box next to your signature.
6. **Indicate to which charity or charities you wish to give.**
 - A. **Federations**–Write the amount on the top line across from the name.
 - B. **Charity within a Federation**– Write the code# (if available), name and amount on the line.
 - C. **Write-In Charity**– If the charity you wish to donate to is not listed in the brochure under a Federation, you may write in any 501c3, tax exempt charity. If we are unable to determine that your choice is a domestic tax-exempt 501c3, your form will be returned to you. We use www.guidestar.org to determine eligibility. We will process contributions to religious organizations without evidence of its tax-exempt status, but be aware your contribution is tax-deductible only if the organization complies with federal tax requirements. You are responsible for determining whether the organization complies. Member agencies written under donor choice will be forwarded to the appropriate Federation. All Write-In Charity contributions are subject to an 11% processing fee. **Checks must be made payable to America’s Best Local Charities (ABLC).**
 - D. **Not Enough Room**–use another form. Write in your name, department and work phone. Fill in the _____ page of _____ pages on the bottom right of the form and staple the two forms together.
7. **Annual Payroll Deduction**–Write your DSW # (from your payroll stub) in the box and sign the form. You must give in multiples of 26 (pay periods). Indicate how much you wish to give per pay period. Please note that there is a minimum of \$1 per pay period. List your yearly amount in the total contribution section. Payroll deductions are distributed to charities on a quarterly basis.
8. **One-Time Donation**–If you are giving to a Federation or charity listed under a Federation, write check(s) payable to the **Federation(s)**, one check per Federation. **Checks made payable to member agencies directly will be returned.** If you are giving to a Write-In Charity (see 6.C above), please provide full address and **make check payable to America’s Best Local Charities (ABLC).** **Checks made payable to agencies directly will be returned.** There is a minimum one-time gift amount of \$25. List the total donation at the top of the page under One-Time Donation and under Total Contribution. Staple your check(s) to this form.
9. **Total Annual Gift**–Add up your payroll deduction and one-time gift(s).
10. Turn in your pledge form to your Department Captain or Coordinator.
11. **For further information, contact our website at <http://www.sfgov.org/charity> or call our Donor Hotline at (415) 925-2604.**

What Your \$\$ Buys







\$2 per month

-  Healthy meals for a homeless person in your community
-  Shoes, clothes and winter coats for families in need
-  Adoption of one dolphin, which helps ensure that tuna remains truly dolphin-safe
-  Oral hydration therapy for 10 children for one year in Asia, Africa, or Latin America
-  One social or recreational outing for a person with developmental disabilities
-  Provides a day meal at summer camp for disadvantaged youth

\$10 per month

-  Provides a surgical kit with essential instruments for emergency exams and basic surgery in the poor areas of the world
-  Fresh produce at wholesale prices for low-income families
-  One week at summer day camp for a child with sickle cell disease
-  Provides educational materials resources and services to an AIDS patient and their families
-  Sponsors a major cleanup of a seven mile stretch of river of household debris, construction and auto parts

\$25 per month

-  One airline ticket for a family member to see a terminally ill loved one
-  Holiday meals for homebound patients
-  A semester-long, hands-on high school classroom series on environmental health and the urban environment
-  Supplementary dry feeding kit – enough to feed 500 malnourished children in the poorest areas of the world
-  Daycare for a child of a mother who is receiving job training
-  Provide educational software for three computers for youth at risk

Leadership Givers Recognition – If you contribute \$500 or more annually either through payroll deduction, one-time gift or both, you will receive a special SF City and County Combined Charities Campaign Lapel Pin. Please ask your Department Captain or Coordinator for more information.