## **ARE YOU RETIRING?**

DON'T MISS OUT ON YOUR CHANCE TO CONTINUE GIVING!

١.	NAME		* CALIFORNIA STATE EMPLOYEES * CHARITABLE CAMPAIGN
3.	HOME ADDRESS		RETIREE
Э.	HOME OR CELL PHONE	D. PERSONAL EMAIL	PLEDGE FORM
	DEPARTMENT RETIRING FROM		
Ε.	BEGINNING THE MONTH OF  Your monthly deduction will continue until you instruct otherwine.	I FROM MY CALPERS WARRANT (\$5 MINIMUM PER MONTH)  IN THE YEAR  . ise. The Nonprofit Organization(s) you contribute to will remain the same anthly deduction or the Nonprofit Organization you contribute to then	ensure you've included your Socia Security Number and Signature(s and mail your completed form in the
F.	you much complete a new CSECC Retiree Pledge Form.  I authorize the California Public Employees Retirement System to process the deduction listed above.		envelope provided to CSECC, 10389 Old Placerville Road, Sacramento CA 95827.
	<b>&gt;</b>		
	SIGNATURE REQUIRED (INK ONLY)		SOCIAL SECURITY NUMBER

## DESIGNATION(S) TO SPECIFIC ORGANIZATIONS APPROVED AND LISTED IN THE DONOR RESOURCE GUIDE

An employee has the right to designate all or part of your contribution to the charitable organization(s) of their choice. Any undesignated portion will be distributed to charitable organizations by PCFD 024 United Way Capital Region. An online Donor Resource Guide is available at www.csecc.org.

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

ORGANIZATION NAME

Designate to specific charitable organizations approved and listed in the donor resource guide:

		Ф		
4		\$		
5		\$		
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	¢		
(REQUIRED) ADDRESS	WRITE-IN ORGANIZATION:			
(REQUIRED) CITY/STATE/ZIP	TOTAL ALL	¢		
PHONE NUMBER TAX I.D. #	MONTHLY DESIGNATIONS	\$		
THIS IS A <b>ONE-TIME GIFT</b> (CHECK/CASH) FOR THE TOTAL AMOUNT OF: \$ . Please make check payable to <b>CSECC</b> .				
☐ I WISH TO HAVE THE PCFD ACKNOWLEDGE MY DONATION.  PREFERRED METHOD OF CONTACT: ☐ UNITED STATES POSTAL MAIL ☐ EMAIL				
PREFERRED NAME(S) FOR RECOGNITION (IF DIFFERENT THAN ABOVE)				
I AUTHORIZE THE PCFD TO DISTRIBUTE MY CONTRIBUTIONS AS STATED ABOVE.				
<b>,</b>				
SIGNATURE REQUIRED (INK ONLY)	DATE	_		
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.				

AMOUNT PER MONTH

\$5 MINIMUM PER ORGANIZATION

\$

ORGANIZATION CODE #

## STATE EMPLOYEE RETIREES: CONTINUE GIVING



Since 1957, state employees have generously supported the California State Employees Charitable Campaign (CSECC) throughout their careers and many want to continue their public service of charitable giving once retired. CSECC has a simple retiree giving program that allows employees to continue their philanthropic commitment to their communities, state and the world.

By deciding to participate in CSECC you can see how easy it is to continue your tax-deductible gift through CalPERS. It is as simple as filling out the pledge form, which can be found on our website (www.csecc.org) and mailing it to: CSECC, 10389 Old Placerville Road, Sacramento, CA 95827.

For more information about the CSECC please visit: www.csecc.org

