

2024 Combined Federal Campaign FEDERAL RETIREE PLEDGE FORM

OPM Form 1654-B
OMB Control #3206-0271

Please use black ink. Sections marked with * are mandatory.

Online pledges are accepted through Jan. 15, 2025, by visiting [CFCgiving.opm.gov](https://cfcgiving.opm.gov). Keep a copy of this form before sending the original to: CFC Processing Center, P.O. Box 7820 Madison, WI 53707-7820. Checks are accepted, however do not send cash. CFC organizations do not provide goods or services in whole or partial consideration for any contributions made to the organizations via this pledge.



Donor Information (required)

1. Primary Email Address *		2. Secondary Email Address	
3. Name (first name) *		(last name) *	
4. Retiree Type - Pay Service (required for annuity deduction) <input type="radio"/> Military - DFAS <input type="radio"/> Civilian - OPM <input type="radio"/> Judiciary		5. Home ZIP Code or APO/FPO *	

Pledge Information (required)

6. Allotment Source *	7. Amount Per Deduction	8. Total Annual Gift *	9. Charity Designation *														
<input type="checkbox"/> Annuity SSN (only required if electing annuity) [][][] - [][] - [][][][][]	\$ _____ <input checked="" type="checkbox"/> Monthly (x12)	\$ _____ <i>(amount per deduction multiplied by 12)</i>	You must select one or more 2024 CFC-approved charities or federated groups to receive your donation. Confirm each charity's five-digit code in the online charity search or charity listing and enter it along with the total dollar amount you want each charity to receive below. The total annual gift from the left must match the total pledged to charities below. If you would like to donate to more than five charities, visit CFCgiving.opm.gov to complete an online donation or attach another copy of this form with the total annual contribution amount appearing on copy 1 of X.														
<input type="checkbox"/> Check Make checks payable to "Combined Federal Campaign" and attach to this form.	N/A	\$ _____ Check Amount															
10. Authorization *			<table border="1"> <thead> <tr> <th>CFC Charity Code</th> <th>Annual Amount</th> </tr> </thead> <tbody> <tr> <td>[][][][][]</td> <td>\$ _____</td> </tr> <tr> <td>[][][][][]</td> <td>\$ _____</td> </tr> <tr> <td>[][][][][]</td> <td>\$ _____</td> </tr> <tr> <td>[][][][][]</td> <td>\$ _____</td> </tr> <tr> <td>[][][][][]</td> <td>\$ _____</td> </tr> <tr> <td colspan="2">Total Annual Contribution \$ _____</td> </tr> </tbody> </table>	CFC Charity Code	Annual Amount	[][][][][]	\$ _____	[][][][][]	\$ _____	[][][][][]	\$ _____	[][][][][]	\$ _____	[][][][][]	\$ _____	Total Annual Contribution \$ _____	
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If I chose annuity deduction as my payment source, I hereby authorize any agency of the United States government from which I may be retired during 2025 to deduct the amount(s) shown above from my annuity each payment period during the calendar year. These deductions will start with the first annuity payment period following Jan. 15, 2025 and ending with the last allotment period that includes Jan. 15 of the following year. I authorize the government to pay the amounts deducted to the Combined Federal Campaign. I understand that this authorization may be revoked by me in writing at any time before it expires. I also acknowledge that I have the right to receive a notification if the amount(s) scheduled to be transferred differ(s) from the amount(s) displayed above. If I chose check, I hereby authorize Give Back Foundation on behalf of the Combined Federal Campaign to process my paper check as an electronic funds transfer (EFT) for the payment amount elected. Signature: _____ Date: _____																	

Information Release (optional)

11. By checking each box below, I authorize the CFC to release my name and the following to my designated charity(ies):		
<input type="checkbox"/> My pledge amount <input type="checkbox"/> My home address (if opting to release your information, please provide your home address below.) <input type="checkbox"/> My email address (from above)		
Home Address		
City	State	ZIP Code

Individuals may pledge online at cfcgiving.opm.gov and may contact the CFC Help Desk Monday through Friday from 8 a.m. until 6 p.m. Central Time at 800-797-0098 (toll-free) or 608-237-4898 (local/international) with questions about the pledge process.

GIVE HAPPY



Why Give Through the CFC?

We know there are a lot of giving options out there. You might be wondering, “Why should I give through the CFC?” *Here are three great reasons:*

- 1 Give through Payroll Deduction.**
Gifts from each paycheck have a greater impact over time.
- 2 Give to Multiple Vetted Charities.**
Make all your charitable donations and pledge volunteer hours in one place.
- 3 Give for Greater Impact.**
It adds up to so much happiness when we give together.

Find amazing charities here!

Learn more at GiveCFC.org.



An OPM Initiative

Combined Federal Campaign Privacy Act Statement

Pursuant to 5 U.S. C. 522a(e)(3), this Privacy Act Statement informs you why OPM is requesting information on this form.

AUTHORITY: OPM is authorized to collect the information on this form based upon the authority provided in Executive Order (EO) 12353 (March 23, 1982), as amended by EO 13743 (October 13, 2016), and 5 CFR 950 (January 1, 2017). In addition, Executive Order 9397 (November 22, 1943), as amended by EO 13478 (November 18, 2008), permits us to collect your Social Security number (SSN).

PURPOSE: The information you provide is primarily collected and used by OPM to accurately receive, process, acknowledge, and account for your donation to the Combined Federal Campaign (CFC); and to make payments to the charitable organizations to which you choose to donate.

ROUTINE USES: The information we collect from you may be disclosed as a “routine use” to your payroll service provider, if you have chosen to make a recurring gift via payroll annuity; or to your credit card company, bank, or other financial institution for a one-time or recurring gift (using the CFC’s online option) via credit card, electronic check, or automatic deduction from your financial account. With your authorization, we may also share the information you provide to us with local, national, or international charitable organizations or federations. In addition, we may share your information as a “routine use” with other external entities, such as law enforcement or state and federal tax authorities, when the disclosure is necessary to investigate a violation or potential violation of civil or criminal law. A complete list of routine uses can be found in the system of records notice titled “Central-20 National CFC System of Records.”

CONSEQUENCES OF FAILING TO PROVIDE INFORMATION: Providing this information, including your SSN, is voluntary; however, without your signature and all of the information requested, it may not be possible for us to make this gift on your behalf, and we may suspend this pledge. In addition, if you do not provide any of the requested information, we may not be able to process your request for an annuity deduction. If you are making a one-time, lump-sum gift and, therefore, not using the annuity deduction method of payment, you are not required to furnish your SSN.

PUBLIC BURDEN STATEMENT: The public reporting burden to complete this information collection is estimated at 120 minute per response, including time for reviewing instructions, searching data sources, gathering and maintaining the data needed, and completing and reviewing of the collected information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB control number and expiration date. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the Office of Personnel Management, at PRAFORMS@opm.gov. Current information regarding this collection of information – including all background materials -- can be found at <https://www.reginfo.gov/public/do/PRAMain> by using the search function to enter either the title of the collection (Combined Federal Campaign) or the OMB Control Number (3206- 0269).

For detailed instructions on completing this form, visit GiveCFC.org/pledgeform.