



City of Philadelphia Combined Campaign Pledge Form

Check this box for additional pledge form page only.

Pledge online at www.phila.gov/combinedcampaign



EMPLOYEE ID NUMBER

DEPARTMENT CODE #

FIRST NAME

MIDDLE INITIAL

LAST NAME

CONTACT INFORMATION

CITY DEPARTMENT/EMPLOYER	PHONE NUMBER (For use to verify designation)
<input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>

EMAIL
<input type="text"/>

HOME ADDRESS (Optional) Required for acknowledgements if no email
<input type="text"/>

CITY	STATE	ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>

Do you authorize your address and gift amount to be released to the designated charities so that you will receive an acknowledgement? Yes No

DESIGNATING YOUR GIFT Choose which charities to support and enter your pledge amount and payment method.

Charity codes are listed in the Contributors' Guide and at www.phila.gov/combinedcampaign. The minimum required payroll deduction amount for each designated charity is \$2.00 per pay period. To designate more than 5 charities, please use a second form and check the box in the top right corner of the additional page.

CHARITY CODE	CHARITY NAME	PER PAY PERIOD DEDUCTION/CHECK AMOUNT	PAYMENT METHOD	
<input type="text"/>		\$ <input type="text"/>	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Check
<input type="text"/>		\$ <input type="text"/>	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Check
<input type="text"/>		\$ <input type="text"/>	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Check
<input type="text"/>		\$ <input type="text"/>	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Check
<input type="text"/>		\$ <input type="text"/>	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Check

In Honor/Memorial Requests: If you are making one of your gifts above in honor of or in memory of someone, please check the box shown to the right and enter the requested information on page 2 of this form. My gift is in honor or in memory of someone.

Checks: Please make your one-time payment payable to: Combined Campaign. Attach the signed check with your completed pledge form and return to your Department Captain. **Total Check Amount \$**

Recurring Payroll Deduction Gifts: Please check the # of your pay periods here (Deduction period Jan.-Dec. 2025): 26 52 **Total Per Pay Period Deduction Amount \$**

For Payroll Deduction Pledges: Please submit this form electronically to: phillypledges@charities.org

For Check Donations: Please submit this form along with your check donation to your Department Captain.

AUTHORIZATION (Sign and date here to authorize pledge and payment method.)

My signature below authorizes the City of Philadelphia to deduct the amount shown from my paycheck each pay period, starting with my first paycheck in January 2025 and ending with my last paycheck in December 2025, provided the amounts so deducted shall be remitted to the Combined Campaign. I understand that I can revoke this authorization at any time.

Sign: <input type="text"/>	Date: <input type="text"/>
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KEEP A COPY OF THIS FORM AS A TAX RECEIPT. Please keep a copy of this pledge/authorization form for your records (use your smart phone or other scanning device). Contributions to a qualified 501 (c)(3) are tax deductible to the extent of the law. Contributions made to the Campaign are confidential.

IRS Disclosure: No goods or services are provided in whole or in partial consideration for any contribution made via this pledge form.

IN HONOR/MEMORIAM CONTRIBUTION REQUEST (OPTIONAL)

To make your donation in honor/memorial of someone, please complete this section. Enter the charity(ies) you designated on page 1, along with the name and contact information of the recipient you would like acknowledged. The information below will be shared with the designated charity(ies).

In honor/memorial request #1:	In honor/memorial request #2:
<input type="checkbox"/> In honor of <input type="checkbox"/> In memorial of Select One: DR <input type="checkbox"/> MR <input type="checkbox"/> MRS <input type="checkbox"/> MS <input type="checkbox"/> Recipient Name: <input style="width: 90%;" type="text"/> Recipient Address: <input style="width: 90%;" type="text"/> City: <input style="width: 80%;" type="text"/> State: <input style="width: 25%;" type="text"/> Zip Code: <input style="width: 25%;" type="text"/> Designated Charity: <input style="width: 80%;" type="text"/> Charity Code: <input style="width: 80%;" type="text"/> Amount Pledged: \$ <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/>	<input type="checkbox"/> In honor of <input type="checkbox"/> In memorial of Select One: DR <input type="checkbox"/> MR <input type="checkbox"/> MRS <input type="checkbox"/> MS <input type="checkbox"/> Recipient Name: <input style="width: 90%;" type="text"/> Recipient Address: <input style="width: 90%;" type="text"/> City: <input style="width: 80%;" type="text"/> State: <input style="width: 25%;" type="text"/> Zip Code: <input style="width: 25%;" type="text"/> Designated Charity: <input style="width: 80%;" type="text"/> Charity Code: <input style="width: 80%;" type="text"/> Amount Pledged: \$ <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/>

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If you make an online pledge, please DO NOT fill out and submit a paper pledge card for the same gift. Doing both will double the amount you designate to give. If you make a mistake and submit both, let your Department Captain know or contact America's Charities' donor support team via email at help@charities.org or call 703-222-3861 (dial "3" when prompted).

If you receive verification for a pledge you did not make, please contact the CMO lead at (215) 586-3299 and we will correct your account. If you see an unauthorized payroll deduction on your pay stub, contact the Campaign at phillysupport@charities.org and we will correct the error and reimburse you for any unauthorized funds that were withheld.

PARTICIPATING CHARITY CODES

For a list of these organizations and their member/funded charities, see this year's Contributors' Guide or visit www.phila.gov/combinedcampaign.



AIDS Fund
24-0000



America's Charities
22-0000



Bread & Roses Community Fund
12-0000



Catholic Charities
Appeal
21-0000



CHC: Creating Healthier Communities
14-0000



Delaware Valley
Legacy Fund
25-0000



EarthShare Pennsylvania
23-0000



Global Impact
18-0000

**Independent
Charities**

*(vetted by America's
Charities)*
30-0000



Police Athletic League
of Philadelphia
19-0000



United Negro College Fund
20-0000



United Way of Greater Philadelphia
and Southern New Jersey
11-0000



WOMEN'S WAY
15-0000