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Welcome to the CFC Donor Pledging System

Join The 2020 Giving Campaign

We Give Because We Care

Official Solicitation Period September 21, 2020 - January 15, 2021

— Don't Have An Account? —

Sign Up Now

— Already Registered? —

Email: [Forgot Email?](#)

Password: [Forgot Password?](#)

Sign In

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Learn More

OPM Director announces details about the 2020 CFC Solicitation Period.

Get Your CFC Zone News

Enter your ZIP code GO

Find A CFC Approved Charity

Search

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Offered by Give Back FOUNDATION

Services provided by TASC

U.S. OFFICE OF PERSONNEL MANAGEMENT

1900 G Street, NE, Washington, DC 20512
202-479-1900
Federal Relay Service

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Find A Charity

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, 2006), 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 retirement service (e.g., OPM Retirement Services or the Defense Finance and Accounting Services Retiree Pay), if you have chosen to make a recurring gift via a deduction from your 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 for OPM 20, National CFC System.

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 by your retirement service. 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. Individuals may pledge online at www.opm.gov/showsomelovefc; and may contact the CFC Help Desk at (Toll Free) 800-797-0098 or (Local/International) 608-237-4888 (Monday through Friday from 8 a.m. until 6 p.m. CST) with questions about the pledge process or contact us at <https://cfdgiving.opm.gov/contact>.

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Public Burden Statement

We think providing this information takes an average of 30 minutes per response to complete, including the time for reviewing instructions, getting the needed data, and reviewing the completed information collection title. Send comments regarding our estimate or any other aspect of the information collection, including suggestions for reducing completion time, to the Office of Personnel Management (OPM), OPM Forms Officer, Washington, D.C. 20415-7900. The OMB number 3206-0271 is valid. OPM may not collect this information, and you are not required to respond, unless this number is displayed.

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Your Profile Screen

Select Type of Donor

Your Profile

Profile information is required to associate your account with your CFC Zone and to help manage your pledge.

Personal Information

Type of Donor ⓘ

Select Type

- FEDERAL EMPLOYEE OR MEMBER OF THE MILITARY
- FEDERAL ANNUITANT OR MILITARY RETIREE
- FEDERAL CONTRACTOR

First Name

Primary Work Location ZIP or Postal Code ⓘ

I am located in a non-US or foreign territory without a ZIP Code.

Your Department

Select Department

Your Agency

Select Agency

Your Office

Select Office

Contact Information

Primary Email


name@organization.org

Secondary Email (optional) ⓘ

john.doe@domain.org

*All fields are required unless noted.

Charity Search Engine

 Official Website of the U.S. Office of Personnel Management

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Find A Charity



**You can make a difference
— Donate Today!**

Find A Charity

Your search can be very specific or broad — fill in any of the search criteria below.

Charity ⓘ

Location ⓘ

Select a State

Select A Specific Category

All Categories

Select A Specific Zone ⓘ

All Zones

Select an Administrative Fundraising Rate

Any Rate

FSYP or FSYA or MWR ⓘ

Select Military Installation

Volunteer Opportunities Available ⓘ

F Federation **M** Federation Member Organization **I** Independent

Sample Format for Charity Search Results

Add selected charity(s) to their cart.

Results Found Sort By Listing Print Order Clear Results

| | |
|--------------------------|---|
| <input type="checkbox"/> | ADD Charity Name CFC# 00000 EIN 00-0000000 Zone ## City, State AFR 00.0% ⓘ |
| <input type="checkbox"/> | ADD Charity Name CFC# 00000 EIN 00-0000000 Zone ## City, State AFR 00.0% |
| <input type="checkbox"/> | ADD Charity Name CFC# 00000 EIN 00-0000000 Zone ## City, State AFR 00.0% ⓘ |
| <input type="checkbox"/> | ADD Charity Name CFC# 00000 EIN 00-0000000 Zone ## City, State AFR 00.0% |
| <input type="checkbox"/> | ADD Charity Name CFC# 00000 EIN 00-0000000 Zone ## City, State AFR 00.0% |
| <input type="checkbox"/> | ADD Charity Name CFC# 00000 EIN 00-0000000 Zone ## City, State AFR 00.0% |
| <input type="checkbox"/> | ADD Charity Name CFC# 00000 EIN 00-0000000 Zone ## City, State AFR 00.0% ⓘ |

Pledging Details

Follow these 4 steps and click continue to review and submit your pledge.

1 Select Your Payment Method & Account

Payroll [new]
 Bank Account
 Credit Card

Volunteer hours only

2 Select Your Payment Frequency

3 Set Your Annual Pledge

Enter Your Scheduled Contribution:

Monthly

Semi-Monthly

Bi-Weekly

Enter Your Total Annual Pledge Amount:

Annual

Rounded to nearest dollar



Your total annual pledge will match your contributions if deductions are received in all pay periods for the complete CFC pledge year. Actual annual deductions could be less than your pledge. The scheduled contribution shown is the amount of each of your deductions regardless of when processing begins. Your scheduled deductions may take up to 1 to 2 cycles to process. Due to rounding, your deductions may also vary slightly.

4 Update this table to reflect how you want to distribute your pledge to your selected charities.

[Add More Charities](#)

| Charity Information | ANNUAL | | | Share Pledge Information |
|---|---------------------------------|-----------------------------------|-----------------------------------|---|
| | Percentage To Charity | Amount To Charity | Volunteer Hours | |
| Charity Name - IR 8 Name <small>City, State ZIP 00000000</small> Delete | <input type="text" value=""/> % | <input type="text" value=""/> .00 | <input type="text" value=""/> hrs | <input type="checkbox"/> Y/N, where N=information |
| Charity Name - IR 8 Name <small>City, State ZIP 00000000</small> Delete | <input type="text" value=""/> % | <input type="text" value=""/> .00 | | <input type="checkbox"/> Y/N, where N=information |
| Charity Name - IR 8 Name <small>City, State ZIP 00000000</small> Delete | <input type="text" value=""/> % | <input type="text" value=""/> .00 | <input type="text" value=""/> hrs | <input type="checkbox"/> Y/N, where N=information |
| | ##% | \$000.00 | ## | |