MISSOURI STATE EMPLOYEES CHARITABLE CAMPAIGN			Search charities online at www.msecc.mo.gov					
REGION	EMPLOYEE ID		CHARITY CODES		PAY PERIOD AMOUNT		ANNUAL AMOUNT	
NAME		1 , ,	1	\$	x 24	\$		
					\$	x 24	\$	
PREFERRED E-MAIL ADDRESS (FOR MSECC PURPOSES ONLY)								
					\$	x 24	\$	
AGENCY CODE	ORGANIZATION DESCRIPTION			ı	\$	x 24	\$	
REPORTING ORGANIZATION DONATION OPTIONS (SELECT ONE OPTION)			i	\$	x 24	\$		
			ı	\$	x 24	\$		
I wish to donate by paper pledge card (please complete the rest of the card).			1	\$	x 24	\$		
I wish to donate online (please log in at ess.mo.gov to submit an online pledge card).				Φ.	04	6		
I do not wish to give.					\$	x 24	\$	
METHOD OF CONTRIBUTION (SELECT ONE OPTION)			TOTAL	.s	\$	x 24	\$	
Payroll Deduction (Minimum .50 per pay period to each charity designated)			As a Century Club Plus Member, I would like to receive a mini Century Club wall calendar in recognition of my contribution of \$120 or more per year.					
Check/Money Order Attached (CHECKS PAYABLE TO MSECC)								
PAYROLL DEDU	JCTION TIME PERIOD (SELEC	CT ONE OPTION)	per year.		Continuation of \$	120 01 111016	MSECC)	qees/
Continuous Pledge: I hereby authorize the State of Missouri to deduct the amount shown from my pay each pay period beginning 1-1-2026 and continuing until revoked by me in writing.			My name, home address and donation amount may be released to the charitable organization(s) to which I am contributing.					
Calendar Year Pledge: I hereby authorize the State of Missouri to deduct the amount shown from my pay each pay period beginning 1-1-2026 and ending 12-31-2026 or until revoked by me in writing.			Your MSECC contribution is tax deductible to the extent allowed by law. For tax purposes retain the yellow copy of this pledge form and either your canceled check or year-					
SIGN X		DATE			stub as proof was given in			