

NAVY-MARINE CORPS RELIEF SOCIETY FUND DRIVE
100 YEARS: \$1 BILLION TO 4 MILLION SAILORS AND MARINES

USMC Code: 954
 USN Code: T602886

PLEASE PRINT WITH BALL POINT PEN

NAVY MARINE ACTIVE DUTY RETIRED CIVILIAN

<u>NAME</u> (First)	<u>(Initial)</u>	<u>(Last)</u>	<u>PAY GRADE</u>	<u>SOCIAL SECURITY NUMBER</u>

<u>COMMAND/UIC/RUC</u>	<u>HOMEPORT/STATION</u>	<u>EAOS/EAS (MO/DAY/YR):</u>
		/ / /

TOTAL CONTRIBUTION \$ _____ CASH CHECK PAY ALLOTMENT
 (Active Duty Only)

AMOUNT OF PAY ALLOTMENT EACH MONTH (CHECK ONE). MINIMUM \$1. (ACTIVE DUTY ONLY) (INDICATE AMOUNT)

<input type="checkbox"/> \$100 <input type="checkbox"/>	<input type="checkbox"/> \$50 <input type="checkbox"/>	<input type="checkbox"/> \$35 <input type="checkbox"/>	<input type="checkbox"/> \$25 <input type="checkbox"/>	<input type="checkbox"/> \$10 <input type="checkbox"/>	<input type="checkbox"/> \$5 <input type="checkbox"/>	<input type="checkbox"/> OTHER \$ <input type="checkbox"/>
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I hereby authorize the Department of the Navy to deduct the indicated amount from my pay each month for twelve (12) months starting 1 June and ending 31 May of the following year, provided that the amounts so deducted shall be remitted to the Navy-Marine Corps Relief Society, 875 N. Randolph St., Suite 225, Arlington, Virginia 22203. I understand that this authorization may be revoked by me, by an allotment stoppage authorization, at any time before it expires and that it will be revoked automatically upon my separation from the service.

CONTRIBUTOR'S SIGNATURE: _____ (Sign Only For Allotment Authorization) DATE: _____

KEYPERSON SIGNATURE: _____

(CONTRIBUTIONS ARE TAX DEDUCTIBLE)

To be forwarded to the Contributor's Disbursing Office (For Payroll Deduction Only) **(Copy 1)**

PRIVACY ACT STATEMENT

General—This information is provided pursuant to the Privacy Act 1974 (5 U.S.C. §552a) for individuals who complete the pledge form for Navy-Marine Corps Relief Society Contributions.

Authority—Executive Order 12353 authorized arrangements for national voluntary health and welfare agencies to solicit funds from members of the armed forces at their duty stations; 5 U.S.C. §301 (1976); Departmental Regulations.

Principal Purposes and Routine Uses—This form is used as the authority to make deductions from service member's pay and transmit such amounts to the Navy-Marine Corps Relief Society. This information will be disclosed to disbursing office personnel and personnel in the Navy and Marine Corps Finance Center and to the Navy-Marine Corps Relief Society.

Effects of Nondisclosure—The disclosure of this information is voluntary, however, payroll deductions and payments to the Navy-Marine Corps Relief Society cannot be made without a completed form.

Information Regarding Disclosure of Your Social Security Number Under the Privacy Act, Section 7(b)—Disclosure by you of your social security number may be deemed mandatory for the purpose of payroll deductions for contributions. Solicitation of the social security number is authorized under provisions of Executive Order 9397.



What Navy-Marine Corps Relief Can Do!

Help with Emergency Needs

Provide interest-free loans, grants or combinations for:

- emergency transportation
- funerals
- medical/dental bills (patients' share)
- food, rent and utilities
- help when disaster strikes
- personal needs when pay is delayed
- essential vehicle repairs

What Navy-Marine Corps Relief Can't Do!

Help with Conveniences

It cannot be expected to:

- pay bills for non-essentials
- finance liberty and vacations
- pay fines and other legal expenses
- help you live beyond your means

Navy-Marine Corps Relief can help you in time of need... but cannot help you to live beyond your means.

For more information, visit our web site at www.nmcrcs.org

