



2024 CVC TRANSMITTAL REPORT

Date: _____ **Agency Name:** _____
Coordinator Name: _____ **Agency Code:** _____
Coordinator Phone: _____ **Agency Address:** _____

Instructions: Use this Transmittal Report as a cover page for event tracking forms, payroll deduction paper pledges, and checks/money orders you need to deposit to the CVC. Make sure all information is completed accurately. **THE CVC DOES NOT ACCEPT CASH DONATIONS. ALL CASH MUST BE CONVERTED TO A CHECK OR MONEY ORDER.** If you have questions regarding this submission, please contact CVC Support at cvcsupport@dhrm.virginia.gov.

CVC Mailing Address: Commonwealth of Virginia Campaign
P.O. Box 63132
Charlotte, NC 28263-3132

For Fedex or UPS deliveries, use: Commonwealth of Virginia Campaign, 101 N. 14th Street, 12th Floor, Richmond VA 23219

of Pages included in report: _____

Transmittal Summary

Document Type	How many of each type?	Total Giving (\$)
CVC Event Tracking Forms		
Check(s)/Money Order(s)		
Paper Pledges for Payroll		
Total for this Report		

Please provide a brief description of the event(s) tracked in this submission and include the number of employees who participated per event:

Prepared by: _____ **Verified By:** _____

Notes to Coordinators:

1. Please include all documents for deposit following this page.
2. Keep a copy of your transmittals. You may want to assign a sequential number to each document (use the Comments Field) for easier reference.
3. Send transmittals weekly. Do not send transmittals for weeks you have no collections.
4. Print clearly or use the fill-in-form feature to avoid confusion.