



CVC TRANSMITTAL REPORT

Date:

Agency Name:

Coordinator Name:

Agency Code:

Coordinator Phone:

Agency Address:

Instructions: Use this Transmittal Report as a cover page for checks/money orders you need to deposit to the CVC Processing Center. 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 Processing Center Mailing Address: Commonwealth of Virginia Camp
P.O. Box 96906
Charlotte, NC 28296-6906

For Fedex or UPS deliveries, use: Commonwealth of Virginia Campaign, 600 E Main Street, Floor 17, Richmond, VA 23219.

of Pages included in report:

of Checks included in this report:

Transmittal Summary

Event Name (Same as from CVC Event Report)	Date of Event	Total Giving per Event
		\$
		\$
		\$
		\$

Comments:

Report Total:

Two-person integrity is required to account for all money being sent with this form.

Prepared by

Verified By

Print Name: _____

Print Name: _____

Signature: _____

Signature: _____

Notes to Coordinators:

1. Please include all checks or money orders 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 hold funds to send weeks after the event.
4. Print clearly or use the fill-in-form feature to avoid confusion.