



AIDS HAS MET ITS MARCH

Thank you for fighting to end the AIDS epidemic. This is your personal organizer for AIDS Walk Los Angeles 2019. Please read the instructions on the front, as they have changed.

YOUR NEXT STEPS...

1. AIM HIGH!

Don't be afraid to set your goal and tell people about it so they can be a part of your fight. Thousands of men, women and children living with or affected by HIV/AIDS depend on funds raised at AWLA. Your support directly makes a difference in supporting health equity.

2. MAKE IT PERSONAL

Write **your** story. Your AWLA online profile is the first thing your friends and family will see if you send them online to donate. Make the page your own with photos, videos and a personal note. Simply log in at aidswalkla.org to get started.

3. ASK AWAY

The people who mean the most to you want to help the causes that mean the most to you. Your family, friends, neighbors and co-workers will make it a priority to give - if you make it a priority to ask them. The email templates in your online AIDS Walk LA profile are another way to share your story and AIDS Walk's history.

4. GET SOCIAL

Post to your Facebook, Twitter or Instagram account right from your online AWLA profile. You can use pre-written templates or create your own personal message. Download the free AIDS Walk fundraising app to easily request donations and thank donors via your social channels or email.

5. COLLECT YOUR PLEDGES

Encourage everyone to pay when they pledge. Checks can be made out to "AIDS Walk Los Angeles." Sponsors who donate online via credit card or PayPal will receive an email confirmation as a receipt.

MATCHING DONATIONS ARE TWO TIMES THE FUND

How would you like to double your donations? Hundreds of companies match employee donations, so make sure to ask everyone who sponsors you if their company has a matching gift program. Check with your employer to see if they'll match your own donations or the total money you raise (how sweet does that sound?). AIDS Walk LA directly benefits APLA Health & Wellness, which is a 501(c)(3) charitable organization doing business as APLA Health. Donations are tax-deductible to the full extent off the law. Our tax ID number is 84-1661910.

HOW TO TURN IN YOUR DONATIONS

You can turn in your donations to the AIDS Walk office at any time. Be sure to include your name so we can properly credit you.

Send donations to:

611 S Kingsley Dr
Los Angeles, CA 90005

Or visit our office at:

3550 Wilshire Blvd., Suite 890,
Los Angeles, CA 90010

EARN FUNDRAISING AWARDS!

Our award levels have changed this year.

Bronze: \$150

Silver: \$500

Gold: \$750

Star Walker: \$1000

STAR WALKERS

Reach Star Walker status by setting a goal to raise at least \$1,000. Once you've reached \$1000, Star Walkers are given the incentives from Bronze, Silver and Gold levels, but are also offered an exclusive Star Walker pin and plaque. Star Walkers also receive a vinyl street decal that will be on the Star Walk of Fame at the AIDS Walk LA event.



STAR WALKER



Name _____

Address _____

Phone _____

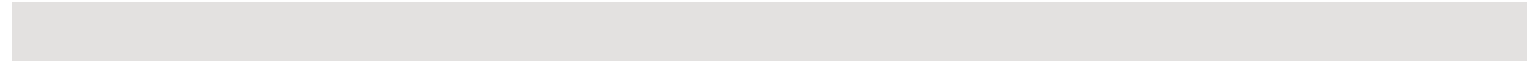
Email _____

Team Name _____

Team Number _____

YOUR ROSTER OF SPONSORSHIP HEROES

Please list your sponsors who are donating with a check, money order, cash or matching gift - in other words, offline fundraising only. Please ask everyone on the list to pay at the time of their pledge. Checks and money orders should be made payable to AIDS Walk Los Angeles. Make sure your sponsors write your name in the memo portion of the check, or we will not know to credit the check to you. All contributions are tax deductible.



SPONSOR'S NAME	AREA CODE	TELEPHONE NUMBER	AMOUNT PLEDGED	+ *MATCHING GIFT \$	= TOTAL PLEDGE	AMOUNT COLLECTED
<i>Example Jane Smith</i>	<i>213</i>	<i>555-1382</i>	<i>\$100</i>	<i>None</i>	<i>\$100</i>	<i>\$100</i>
1.						
2.						
3.						
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Name _____

Address _____

Phone _____

Email _____

Team Name _____

Team Number _____

YOUR ROSTER OF SPONSORSHIP HEROES

Please list your sponsors who are donating with a credit card. Please be sure to get all credit card information needed below. All contributions are tax deductible.

FOR CREDIT CARD DONATIONS PLEASE USE THE SPACES BELOW			AMOUNT PLEDGED	*MATCHING GIFT \$	TOTAL PLEDGE	AMOUNT COLLECTED
1. NAME	AREA CODE	PHONE NUMBER	AMOUNT PLEDGED	*MATCHING GIFT \$	TOTAL PLEDGE	AMOUNT COLLECTED
CREDIT CARD <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER			EXP. DATE			
CARD NUMBER	BILLING ZIPCODE		SEC. CODE			
SIGNATURE	EMAIL ADDRESS					
2. NAME	AREA CODE	PHONE NUMBER	AMOUNT PLEDGED	*MATCHING GIFT \$	TOTAL PLEDGE	AMOUNT COLLECTED
CREDIT CARD <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER			EXP. DATE			
CARD NUMBER	BILLING ZIPCODE		SEC. CODE			
SIGNATURE	EMAIL ADDRESS					
3. NAME	AREA CODE	PHONE NUMBER	AMOUNT PLEDGED	*MATCHING GIFT \$	TOTAL PLEDGE	AMOUNT COLLECTED
CREDIT CARD <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER			EXP. DATE			
CARD NUMBER	BILLING ZIPCODE		SEC. CODE			
SIGNATURE	EMAIL ADDRESS					

* Please attach each Matching Gift Form to the corresponding donation when you submit your funds.

Visit aidswalkla.org to download additional forms.

PLEASE TOTAL PRIOR TO WALK



AMOUNT PLEDGED	*MATCHING GIFT \$	TOTAL PLEDGE	TOTAL TURNED IN