



# AIDS HAS MET ITS MARCH

Thank you for fighting to end the AIDS epidemic. Use this personal organizer only if you do not want to use your online AIDS Walk account to connect with your supporters and keep track of your donations. Please read the instructions on the front, as they have changed. This year's deadline to turn in funds is Sunday, September 13th.

## YOUR NEXT STEPS...

### 1. AIM HIGH!

Thousands of Angelenos living with or affected by HIV/AIDS depend on funds raised at AWLA. Even in this tumultuous year, it's important to set a goal for yourself so your friends and family know exactly how to support you.

### 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](http://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.

### 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

Due to COVID-19 office guidelines designed for your safety, please contact us to schedule a time to turn in funds. You may turn in collected cash to our offices via **appointment only**. Email [aidswalkla@apla.org](mailto:aidswalkla@apla.org) or call or text **(213) 201-9255** to schedule.

### Mail donations to:

Attn: AIDS Walk Los Angeles  
611 S Kingsley Dr  
Los Angeles, CA 90005

## EARN FUNDRAISING AWARDS!

In an effort to continue rewarding our dedicated walkers, we are offering awards for the Bronze and Star Walker levels. Additionally, this year the Bronze fundraising goal has been adjusted to \$100.

**Bronze:** \$100

**Star Walker:** \$1,000

### STAR WALKERS

Reach Star Walker status by setting a goal to raise at least \$1,000. Once you've reached \$1,000, Star Walkers are given the incentives from the Bronze level, but are also offered an exclusive Star Walker pin and plaque. Star Walkers also receive a digital shoutout on our Star Walker page.



**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.                        |            |                  |                |                     |                |                  |
| 4.                        |            |                  |                |                     |                |                  |
| 5.                        |            |                  |                |                     |                |                  |
| 6.                        |            |                  |                |                     |                |                  |
| 7.                        |            |                  |                |                     |                |                  |
| 8.                        |            |                  |                |                     |                |                  |
| 9.                        |            |                  |                |                     |                |                  |
| 10.                       |            |                  |                |                     |                |                  |
| 11.                       |            |                  |                |                     |                |                  |
| 12.                       |            |                  |                |                     |                |                  |
| 13.                       |            |                  |                |                     |                |                  |
| 14.                       |            |                  |                |                     |                |                  |
| 15.                       |            |                  |                |                     |                |                  |
| 16.                       |            |                  |                |                     |                |                  |
| 17.                       |            |                  |                |                     |                |                  |
| 18.                       |            |                  |                |                     |                |                  |
| 19.                       |            |                  |                |                     |                |                  |
| 20.                       |            |                  |                |                     |                |                  |
| 21.                       |            |                  |                |                     |                |                  |
| 22.                       |            |                  |                |                     |                |                  |
| 23.                       |            |                  |                |                     |                |                  |
| 24.                       |            |                  |                |                     |                |                  |
| 25.                       |            |                  |                |                     |                |                  |
| 26.                       |            |                  |                |                     |                |                  |
| 27.                       |            |                  |                |                     |                |                  |
| 28.                       |            |                  |                |                     |                |                  |



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](http://aidswalkla.org) to download additional forms.

**PLEASE TOTAL PRIOR TO WALK**



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