

Pre-Walk Donation Summary Form #1

Use this form to accompany team donations being mailed in before the Walk. Please include a Contribution Tracking Form for each individual Team Member submitting Donations below, so we can properly acknowledge all donors.

Team Name _____

Team Captain _____

Please Check If Applicable: _____ I posted some/all of the enclosed checks/ cash donations on our team website at walktoendlupusnowcpa.org. Total amount posted \$_____. Specify for each team member.

A copy of this form should be attached to all donations mailed in to the Chapter Office prior to Walk Day. Three (3) forms are included for your convenience, with suggested mail by dates.

Mail to: Lupus Foundation of America, 101 Greenwood Avenue, Suite 200, Jenkintown, PA 19046

SUGGESTED MAIL-BY DATE
MONDAY, MARCH 5TH
Remember to fill out the Course Marker Sign Request Form on the back!

OFFICE USE ONLY
Approved in DD_____ Date_____

Team Member Name	Reg. Form Attached?	Donation Checks	Donation Cash	Posted Online?
1.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
9.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
12.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
13.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
14.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
15.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
16.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
17.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
18.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
19.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
20.	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
TOTALS		\$	\$	
GRAND TOTAL CASH & CHECKS \$				

Course Marker Sign Request Form

1st CALL: MARCH 5, 2018

2nd CALL: APRIL 2, 2018

You can now complete this form online at walktoendlupusnowcpa.org

Team Name (if applicable): _____

Name: _____ Date: _____

Phone: _____ Email: _____

Reminders:

- 1 sign is earned per \$250 raised as an individual or team
- Teams automatically receive a Team Sign that is printed with the Team Name
- Each sign may have different wordage (please specify below)
- This form may be photocopied if necessary
- You can preorder signs (up to your fundraising goal); however, only the total number of signs earned by 04/11/16 at 5pm will be ordered. Signs will be printed in the order listed below, starting with "A".

Total Signs Earned # _____ (Leave blank if "pre-ordering.")

Sign A: _____

How many of your total signs should be printed with Sign A design? # _____

Sign B: _____

How many of your total signs should be printed with Sign B design? # _____

Sign C: _____

How many of your total signs should be printed with Sign C design? # _____

Sign D: _____

How many of your total signs should be printed with Sign D design? # _____

Sign E: _____

How many of your total signs should be printed with Sign E design? # _____

Sign F: _____

How many of your total signs should be printed with Sign F design? # _____

Please return form on suggested mail-by date to:

Email: info@lupustristate.org Fax: 215-517-8483

Mail: Walk to End Lupus Now, 101 Greenwood Avenue, Suite 200, Jenkintown, PA 19046

Questions? Contact the Chapter Office at 866-517-5070 or info@lupustristate.org