

Cure Autism Now WALK NOW

2005 DONATION FORM

You can also donate online at www.walknow.org

Emily Stoecker

Participant's name

99253292

Supporter ID#

72727

Event ID

THANK YOU

Thank you for sponsoring a WALK NOW participant. Please review all the information on this form carefully and write legibly, in order to prevent processing errors.

Deadline for mailing donations is *one week prior to the event*.

Donations mailed after that time will be applied to participant accounts after the Walk.

I SUPPORT YOU EVERY STEP OF THE WAY!

Please print clearly in the spaces provided below

First Name: _____ Last Name: _____

Address: _____ Apt/Suite: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Would you like to be included on our mailing list? YES NO

PLEASE MAKE CHECKS PAYABLE TO: CURE AUTISM NOW

MATCHING GIFT PROGRAM

Many companies provide their employees with matching gifts/pledges. Please consult your employer on its matching gift guidelines and attach matching gift forms accordingly.

Please mark the box corresponding to your pledge commitment

- | | |
|------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> HONORARY WALKER \$500 | <input type="checkbox"/> ENCOURAGEMENT \$50 |
| <input type="checkbox"/> COMMITMENT \$250 | <input type="checkbox"/> SPIRIT \$25 |
| <input type="checkbox"/> INSPIRATION \$100 | <input type="checkbox"/> HEART (other amount) |

Please choose one form of payment

Check Check# _____

Please write the participant's name on your check.
Make checks payable to CURE AUTISM NOW.

Credit Card Amount \$ _____

Choose One:

Visa MasterCard Discover American Express

Credit Card Number: _____

Expiration Date: _____ C.I.D.#(On back of Card) _____

Authorization Signature: _____

PLEASE MAIL ALL DONATIONS TO CURE AUTISM NOW AT THE ADDRESS LISTED ON THE LEFT



5455 Wilshire Blvd.
Suite Seven-Fifteen
Los Angeles, CA
90036-4234

888.8AUTISM
323.549.0500
323.549.0547 fax
www.cureautismnow.org

----- CUT ALONG THIS LINE -----

DONOR RECEIPT

Thank you once again for supporting this participant and Cure Autism Now. Cure Autism Now is committed to promoting and funding research with direct clinical implications for treatment and a cure for autism. With your support, we are one step closer!
Please retain the bottom portion of this form for your tax records.

Pledges are tax deductible to the fullest extent allowed by law.
501 (c)(3) NUMBER: 95-4542637

Amount Donated \$ _____ Date _____

Check Credit Card



5455 Wilshire Blvd.
Suite Seven-Fifteen
Los Angeles, CA
90036-4234

888.8AUTISM
323.549.0500
323.549.0547 fax
www.cureautismnow.org