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Donation record	
WY II AY	Cash: \$
Walker Name:	Checks: \$
Team Name:	Total: \$

Office Use:

THANK YOU for planning to participate in LifePath's 30th annual Walkathon by collecting donations in support of underfunded programs that offer options for independence for local elders, persons with disabilities, and their caregivers.

As you engage with your community, family and friends, please share that funds raised through the 2022 LifePath Walkathon are critically needed to support LifePath's broad array of programs and services including Meals on Wheels, In-Home Services, Benefits Counseling, Protective Services, SHINE, Healthy Living, Money Management, and more. By supporting LifePath and those we serve in this way, you make independence an option in every way possible.

2022 Walkathon Details:

DATE: Saturday, May 7, 2022

TIME: 9 am until 12:30 pm

LOCATION: 101 Munson Street, Greenfield, MA

Information regarding collecting donations:

- Record each donation you receive on the Donation Record
- If your donor requests a gift receipt, please fill in their address and/or email address
- Checks may be made out to LifePath with special notes included on the memo line (team name, designation, etc.)
- It is preferred and more secure that checks are submitted instead of cash
- You are encouraged to send your contributions ahead of time to: LifePath, 101 Munson Street, Suite 201, Greenfield, MA 01301

Walker name:	Team Captain Name:	
Company:		
Address:		
City, State, Zip:		
Phone:	Email:	
Individual goal: \$	Team goal: \$	

Thank you for your effort and support!



Donation record

Walker Name: _	
Геат Name:	

	Donor Name	Gift Amount	Payment (check/cash)	If gift receipt is requested, fill out address and/or email address.	Phone and email	Notes
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2.						
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Donation record

Walker Name: _	
Team Name:	

	Donor Name	Gift	Dormant	If aift magaint is magazated	Phone and email	Notes
	Donor Name	Amount	Payment (check/cash)	If gift receipt is requested, fill out address and/or email address.	Phone and eman	Notes
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Donation record

Walker Name:	
Team Name:	

	Donor Name	Gift Amount	Payment (check/cash)	If gift receipt is requested, fill out address and/or email address.	Phone and email	Notes
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