



Date: _____

On behalf of the **AIDS Service Foundation of Greater Kansas City**, I would like to say “thank you” for _____’s gift to **AIDS WALK Kansas City**. Your contribution of \$ _____ is greatly appreciated. The **AIDS Service Foundation of Greater Kansas City** is a non-profit 501 (c) 3 organization.

With your gift, you have helped make the following possible:

- 🚫 **Thrive Health Connection’s** (formerly Good Samaritan Project) goal to educate, empower and enrich lives. A regional healthcare leader and influencer, Thrive Health offers holistic and integrated health and wellness services to individuals affected by HIV and other STIs, LGBTQ communities, and those seeking a welcoming and affirming health community.
- 🚫 **SAVE, Inc.’s** effort to provide comprehensive housing solutions, thereby empowering those living with, or at risk for, HIV/AIDS to lead healthy stable lives with personal dignity.
- 🚫 **KC Care Health Center’s** mission to promote health and wellness by providing quality Care, Access, Research and Education to the underserved and all people in our community.
- 🚫 **Hope Care Center’s** capacity to offer long-term nursing care to those challenged by HIV/AIDS in an environment more like “home” than an institution.

Again, many thanks for your support of **AIDS WALK Kansas City**.

Sincerely,
Michael Lintecum
Event Director