

KAPID Instructions for Processing Tootsie Roll Collections

Instructions for Filling out KAPID Tootsie Roll Fund Drive Report

- Access web site: www.kykofc.com
 - Select icon “Resources”
 - Select icon “Forms-Kentucky”
 - Select “**KAPID Tootsie Roll Fund Drive Report form - Option A form - Fully Manual Input
 - Option B form – Partially Fillable Input**
- The above form **MUST** be downloaded to a computer hard-drive **BEFORE** input.
 - If unable to download form, just do a hardcopy print of the form from web site and fill it manually.
- Open the PDF formatted form on your computer and complete the **highlighted** fields. **Use the “TAB” key on keyboard to move from one field to the next.**
 - First field to enter is “Council Name” – place cursor on the field line and enter council name. Hit “TAB” key to next field;
 - Second field to enter is “Council Number” – enter council number. Hit “TAB: key to next field;
 - (line 1) Third field to enter is “Amount of Funds Collected” – enter total collected amount from Tootsie Roll fund drive. Enter amount in dollar and cents – example: collected 115.75 enter as 115.75
 - Continue with Line 2 thru 4 in same manner as Line 1. **Use the “TAB” to move from line to line.**
 - Line 5 – Cost of Tootsie Roll: Enter TR cases used in Fund drive. Next “TAB” to extended amount field for cost of TR. Multiply case used x \$20 and enter extend amount. Will auto-fill with Option B form.
 - TAB to Line 6 – enter amount

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- **Instructions for Filling out KAPID Tootsie Roll Fund Drive Report (continued):**
 - **TAB to Line 7 – enter amount**
 - **TAB to Line 8 – calculate share of KAPID (Association) versus Council share of Line 7. $20\% \times$ Line 7 amount. Will auto-fill with Option B form.**
 - **TAB to Line 9 – enter council share of Line 7. Subtract Line 8 from Line 7. Will auto-fill with Option B form.**
 - **TAB pass Line 10 thru 13 since they are “hard coded” – no manual entry required.**
 - **TAB to Line 14 – Subtract Line 13 “\$5.00” from Line 9. Enter amount. Will auto-fill with Option B form.**
 - **Line 14 will be the amount the Council will receive from KAPID for distribution to council’s designated organizations. Identify council’s organizations on the “KAPID Tootsie Roll Distribution Report Form”**
 - **TAB to “Submitted Report Date” – format MM/DD/YY . Option B form only.**
- **SAVE FILE to computer & PRINT , and / or SCAN the hand written form (i.e, create a copy) and submit the printed form to POC stated on form along with a check made out to KAPID.**

KAPID Instructions for Processing Tootsie Roll Collections

Instructions for Filling out KAPID Tootsie Roll Distribution Report

- Access web site: www.kykofc.com
 - Select icon “Resources”
 - Select icon “Forms-Kentucky”
 - Select “KAPID Tootsie Roll Distribution Report Form”
 - The above fillable form will need to be downloaded to a computer hard-drive.
 - If unable to download form, just do a hardcopy print of the form and fill it manually.
 - Open the PDF formatted form on your computer and complete the **highlighted** fields. **Use the “TAB” key on keyboard to move from one field to the next.**
 - When entering the amount fields, please enter dollar & cents; example 78.92 enter as 78.92
 - All fields must be manually entered.
 - When entering the “Category” please check the drop-down ▼ for selecting correct category (if manually entered – check out below categories to select from).

CATEGORY

A - RECREATION & ATHLETICS ▼

A - RECREATION & ATHLETICS
B - SOCIAL & BEHAVIORAL
C - AUDIO/VISUAL EQUIPMENT
D - ARTS & CRAFTS
E - EDUCATIONAL TRIPS

- When form is completed - SAVE FILE to computer & PRINT , and / or SCAN the hand written form (i.e, create a copy) and mail / email the form to POC shown at bottom of form.



Knights of Columbus

KENTUCKY ASSOCIATION FOR PERSONS
WITH INTELLECTUAL DISABILITIES, INC.
P.O. Box 206067, LOUISVILLE, KY 40250-6067

COUNCIL FUND DRIVE REPORT FORM

COUNCIL NAME KYKOF C

NUMBER 00000

1.	AMOUNT OF FUNDS COLLECTED		234.90
2.	EXPENSES (STAMPS, POSTERS, ETC.)		50.00
3.	SUBTRACT LINE 2 FROM LINE 1		184.90
4.	SEND ASSOCIATION TREASURER AMOUNT ON LINE 3		184.90
5.	COST OF TOOTSIE ROLLS (\$20 X NUMBER OF BOXES)	4	80.00
6.	NET PROCEEDS (SUBTRACT LINE 5 FROM LINE 4)		104.90

DIVISION OF FUNDS

7.	TOTAL FROM LINE 6		104.90
8.	ASSOCIATION'S SHARE (20% OF LINE 7)		20.98
9.	COUNCIL'S SHARE (SUBTRACT LINE 8 FROM LINE 7)		83.92
10.	COST OF APRONS (NUMBER X \$12)	FREE	\$ 0.00
11.	COST OF HATS (NUMBER X \$3)	FREE	\$ 0.00
12.	COUNCIL'S DUES (\$5)		\$ 5.00
13.	ADD LINES 10, 11 AND 12		\$ 5.00
14.	AMOUNT FOR COUNCIL DISTRIBUTION (SUBTRACT LINE 13 FROM LINE 9)		78.92

Due By: January 1, 2024

Submitted Report Date 11/01/23

MAKE CHECK PAYABLE TO: **KAPID** SEND CHECK FOR TOTAL FROM LINE 4 TO:

Charles Baumbusch, PGK, 3301 Lanfair Ct, Louisville, KY 40241-2715

SAMPLE AFTER INPUT



Knights of Columbus

KENTUCKY ASSOCIATION FOR PERSONS
WITH INTELLECTUAL DISABILITIES, INC.
P.O. Box 206067, LOUISVILLE, KY 40250-6067

REQUEST FOR DISTRIBUTION - COUNCIL'S FUND ACCOUNT

COUNCIL NAME KYKOFC NUMBER 00000
DATE 11/01/23
TO: ASSOCIATION PRESIDENT
Our Council's Balance is**** \$ 78.92

Please authorize the following distribution from our Account:
(Date checks are required) ASAP

A CERTIFICATION AND AGREEMENT FORM FOR EACH ORGANIZATION MUST ACCOMPANY THE REQUEST FOR DISTRIBUTION

CATEGORIES: A: Recreation & Athletics B: Social & Behavioral C: Audio-Visual Equipment
D: Arts & Crafts E: Educational Trips

	<u>TO</u>	<u>AMOUNT</u>	<u>CATEGORY</u>
1.	CHARITY NUMBER 01 11111 Donation Street Giveaway, KY 41111	\$ <u>46.00</u>	A - RECREATION & ATHLETICS
2.	CHARITY NUMBER 02 11112 Donation Street Givefreely, KY 41123	\$ <u>20.00</u>	A - RECREATION & ATHLETICS
3.	_____	\$ _____	A - RECREATION & ATHLETICS
4.	STATE CAMPING PROGRAM	\$ <u>12.92</u>	
	TOTAL DISTRIBUTION REQUESTED	\$ <u>78.92</u>	
	NEW BALANCE (Opening balance less distribution)	\$ <u>0.00</u>	

Please Mail checks to: Council 00000
4444 Council Street
Council, KY 40023

GRAND KNIGHT NAME: (Signature) IF SENT EMAIL - NO SIGNATURE

****CONSULT ASSOCIATION'S TREASURER IF COUNCIL'S BALANCE UNKNOWN****

COPY: Council Files

Mail Request To: James E. Fink, PSD, 3060 Nadina Drive, Louisville, KY 40220
Email addr: Bailiff1933@gmail.com

SAMPLE AFTER INPUT