



# 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 \_\_\_\_\_ NUMBER \_\_\_\_\_

- |   |          |
|---|----------|
| 1. AMOUNT OF FUNDS COLLECTED                          | \$ _____ |
| 2. EXPENSES (STAMPS, POSTERS, ETC.)                   | \$ _____ |
| 3. SUBTRACT LINE 2 FROM LINE 1                        | \$ _____ |
| 4. <b>SEND ASSOCIATION TREASURER AMOUNT ON LINE 3</b> | \$ _____ |
| 5. COST OF TOOTSIE ROLLS (\$20 X NUMBER OF BOXES)     | \$ _____ |
| 6. NET PROCEEDS (SUBTRACT LINE 5 FROM LINE 4)         | \$ _____ |

### DIVISION OF FUNDS

- |   |          |
|---|----------|
| 7. TOTAL FROM LINE 6  | \$ _____ |
| 8. ASSOCIATION'S SHARE (20% OF LINE 7)                                | \$ _____ |
| 9. COUNCIL'S SHARE (SUBTRACT LINE 8 FROM LINE 7)                      | \$ _____ |
| 10. COST OF APRONS (NUMBER X \$12)                                    | \$ _____ |
| 11. COST OF HATS (NUMBER X \$3)                                       | \$ _____ |
| 12. COUNCIL'S DUES (\$5)  | \$ _____ |
| 13. ADD LINES 10, 11 AND 12   | \$ _____ |
| 14. AMOUNT FOR COUNCIL DISTRIBUTION<br>(SUBTRACT LINE 13 FROM LINE 9) | \$ _____ |

Due By: January 1, 2021

**SEND CHECK FOR TOTAL FROM LINE 4 TO:**

James E. Fink, PSD, 3060 Nadina Drive, Louisville, KY 40220-1755