

Nebraska State Council



Knights of Columbus

TO: Sammi and Stephen Lowery
 Intellectual Disabilities Directors
 Nebraska Knights of Columbus
 1301 Thunderbird Blvd
 Lincoln, NE 68512
 Phone: (402) 540-1670
 Email: sglowery82@gmail.com

From: Council No. _____
 Council Name _____
 Address _____
 City _____
 Zip Code _____
 Date _____

WE HAVE PARTICIPATED IN THE CAMPAIGN FOR PEOPLE WITH INTELLECTUAL DISABILITIES:

Our council purchased _____ cases. Total cases distributed _____.

Our campaign was held on _____.

List dates of drive

1. Total revenue received before deductions: \$ _____
2. Cost of Tootsie Rolls®: \$ _____
3. Net proceeds (deduct line 2 from line 1): \$ _____

Please make check payable to **K of C Intellectual Disabilities Foundation of Nebraska, Inc.** for the amount shown on **line 3** above

THIS REPORT MUST BE SUBMITTED AND CHECK RECEIVED BY JANUARY 31. THIS IS EXTREMELY IMPORTANT!

REQUEST FOR 50% OF NET PROCEEDS:

Please list the names of organizations and the amounts for each that you wish for the State Directors to issue checks for.

NAME	AMOUNT
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL (MUST BE 50% OF NET PROCEEDS LISTED ON LINE 3): \$ _____

Signatures:

 Council Grand Knight

 Council Intellectual Disabilities Chairman