

OPERATION HOPE FUNDRAISING REPORT
(DUE NO LATER THAN DECEMBER FIRST)

Date: _____

Council Reporting

Name: _____ Number: _____ Location: _____

Knight Completing This Report

Name: _____ Position (i.e. FS, GK) _____

Phone: _____ E-mail address: _____

Income

Tootsie Roll Campaign: (Funds donated while distributing free Tootsie Rolls)	\$ _____	} 3 for Gross Income
Second Source Funds: (Other Council fundraisers – see Handbook for ideas)	\$ _____	
Business Donations: (Donations from Businesses send directly to CHF)	\$ _____	
Brief description: _____		
Business Source _____		
Gross Income:		\$ _____

Expenses

Tootsie Roll Candy:	\$ _____	} Add these 2 for Total Expenses
Other Expenses:	\$ _____	
Total Expenses:		\$ _____

Net Amount (Gross Income – Total Expenses): \$ _____

Mail check for Net Amount payable to: **Columbus HOPE Foundation, Inc.** to

Larry Papineau, Secretary, CHF
108 Squire Court
Summerville, SC 29485-8012

Grant Funds available to the Council are 85% of Net Amount rounded to the nearest dollar.
 The remaining funds are to be used by the CHF to issue State grant checks.
 Calculate your Council's share below:

NET AMOUNT \$ _____

Grant Funds Available (= 0.85 x Net Amount, rounded to nearest dollar) \$ _____

I hereby certify this is a true report of income and expenses

Grand Knight