



# Wisconsin State Council

**Knights of Columbus**

In Service to One, In Service to All

## Council Charity Grant

### Council Charity Fund Request Form

Please fill out this form completely to request a distribution from our State Charity Raffle Fund to your Council's Charity Fund. **This form is due on or before May 1.**

Fraternal Year \_\_\_\_\_

Date Submitted \_\_\_\_\_

Council #: \_\_\_\_\_ Council Name: \_\_\_\_\_

District # \_\_\_\_\_ Amount Requested: \_\_\_\_\_

Amount received last year from the State Charity Raffle? \_\_\_\_\_

Does your Council have a separate banking account for distribution of these funds? YES ☐ NO ☐

NOTE: Following Best Accounting practices protects the integrity of this program.

Please indicate, in category and amount, how your Council used the State Charity Raffle funds received last year.

Amount


Authorized categories are: Vocations Support, including RSVP; Disaster Relief for Individuals; Relief of Financial Hardship due to Accident or Illness.

Grand Knight: \_\_\_\_\_ (Print Name)

\_\_\_\_\_ (Signature)

Treasurer: \_\_\_\_\_ (Print Name)

\_\_\_\_\_ (Signature)

Send completed form to:

Charity Director  
Wisconsin State Council  
Knights of Columbus  
4297 W. Beltline Hwy.  
Madison, WI 53711

**For State Council use only**

Amount Granted to Council

\_\_\_\_\_

**IMPORTANT NOTICE:** Only fully completed forms will be considered.

1. Mail one copy to State Office or e-mail to forms@wikofc.com & one copy for Council files.
2. FORM # CCGF
3. Revision date 11/11/2022 scg