



# Connecticut State Council Knights of Columbus

Campaign for People with Intellectual Disabilities  
"How Sweet it is to Help"



## REQUEST FOR DISTRIBUTION

Council No. \_\_\_\_\_ Location \_\_\_\_\_

Membership \_\_\_\_\_ Drive Date(s) \_\_\_\_\_

Gross Receipts from Drive \$ \_\_\_\_\_ Check No. \_\_\_\_\_

MINUS Candy Cost # of Cases \_\_\_\_\_ \$ \_\_\_\_\_ Check Date \_\_\_\_\_

NET RECEIPTS from Drive \$ \_\_\_\_\_

MINUS 20% for State CPID Programs \$ \_\_\_\_\_

Net for Council Distribution \$ \_\_\_\_\_

Gross per Case \$ \_\_\_\_\_

.....  
Worthy State Deputy: This council requests the following distribution from our net share:

TO:	ADDRESS:	AMOUNT:
_____	_____	\$ _____
_____	_____	
_____	_____	\$ _____
_____	_____	
_____	_____	\$ _____
_____	_____	

Please mail these checks to:  
\_\_\_\_\_, Grand Knight  
Name: \_\_\_\_\_  
Date: \_\_\_\_\_

**Instructions:** Make Checks Payable to: "Columbian Charities of Connecticut, Inc."  
Retain Copy for Council Records  
Mail other copies to the State CPID Chairman with CCCI Form