

IN-SO1



# Knights of Columbus

## Indiana Special Olympics Check Request Form

Distribution Request: \$ \_\_\_\_\_

Amount of council check to state council:

Amount to be Donated to Special Olympics: \$ \_\_\_\_\_

\_\_\_\_\_  
Grand Knight

\_\_\_\_\_  
Date

Checks written to the above organization for the amount indicated will be returned to the council for distribution. Unless otherwise directed, the checks will be mailed to the financial secretary of the council at the address listed in the recent state directory. Send copy of this report and council check made payable to **Indiana State Council** to the state treasurer at the address in the current state directory.

Submit to: Indiana State Treasurer

Copies to: District Deputy, Council file

[soic@indianakofc.org](mailto:soic@indianakofc.org); [program@indianakofc.org](mailto:program@indianakofc.org); [forms@indianakofc.org](mailto:forms@indianakofc.org);