

IN-VET-WL1



Knights of Columbus DUE BY: June 15

**INDIANA STATE COUNCIL
VETERAN’S – WARRIORS TO LOURDES DONATION REPORT**

Council Number _____ Date _____

Council Name _____

Council Location _____

Grand Knight _____

Veteran’s Chairman _____

Amount of Donation \$ _____ Check# _____

Source of Funds _____

Make your check payable to “Indiana State Council” and indicate “WARRIORS TO LOURDES DONATION” on the memo line.

SEND CHECK AND THIS FORM TO: INDIANA STATE TREASURER

COPIES TO: State Veteran’s Affairs Chairman
State Community Director
District Deputy
Council Files

This form is available online at www.indianakofc.org/forms