



PENNSYLVANIA STATE COUNCIL
KNIGHTS OF COLUMBUS
DISASTER RELIEF FUND

DATE OF APPLICATION _____

MEMBER'S NAME _____ MEMBERSHIP NO. _____

YEARS OF SERVICE _____ COUNCIL NUMBER _____ DISTRICT NUMBER _____

CHAPTER _____ COUNTY: _____

DESCRIPTION OF DISASTER

Three horizontal lines for describing the disaster.

PLEASE PROVIDE DOCUMENTATION- PHOTOS, NEWSPAPER CLIPPINGS, ECT.

DOES COUNCIL HAVE RELIEF FUND? _____ DOES CHAPTER HAVE RELIEF FUND? _____

GRAND KNIGHT'S SIGNATURE _____

D.D. SIGNATURE _____

MAIL TO: State Secretary

FOR STATE COUNCIL USE ONLY:

DATE APPLICATION RECEIVED _____

DATE COUNTY DECLARED DISASTER: ____/____/____ VERIFY WITH STATE OFFICER _____

DOCUMENTATION _____

CURRENT COUNCIL AUDIT ON FILE YES___ NO___ PROPERLY COMPLETED YES___ NO___

RECOMMENDATION OF STATE OFFICER _____

GRANT APPROVED: YES___ NO___ AMOUNT \$ _____ VOUCHER # _____

CHECK SENT TO : _____

STATE DEPUTY

STATE SECRETARY

STATE TREASURER

NOTE: ALL INFORMATION RELATIVE TO THIS REQUEST IS TO BE KEPT IN STRICKEST CONFIDENCE, AND IS TO BE SHARED WITH NO ONE EXCEPT STATE AUDITORS UPON THEIR REQUEST.