

Collection Statement

Name of Person to whom the Permit was Granted

Address of Permit Holder

Name of Charity

Date of Collection

Area of Collection

Proceeds of Collection	Amount	Total	Expenses & Application of Proceeds	Amount	Total
From Collecting Boxes			Printing and Stationery Postage Advertising		
Interest on Proceeds			Collecting Boxes Badges Emblems		
Other Items			Other Items		
			Payment approved under Regulations (15(2))		
			Disposal of Balance (insert particulars)		
TOTAL	£		TOTAL	£	

Certificate of the Person to whom the Permit was Granted:

I certify that to the best of my knowledge and belief the above is a true account of the proceeds, expenses and application of the proceeds of the collection.

Signed:

Date:

Certificate of Accountant or Independent Person Acceptable to Wychavon District Council:

I certify that I have obtained all the information and explanations required by me and that the above is in my opinion a true account of the proceeds, expenses and application of the proceeds of the collection.

Signed:

Date:

Qualifications:

List of Collectors

NAME OF COLLECTORS		AMOUNTS CONTAINED IN EACH COLLECTING BOX	
1)		1)	
2)		2)	
3)		3)	
4)		4)	
5)		5)	
6)		6)	
7)		7)	
8)		8)	
9)		9)	
10)		10)	
11)		11)	
12)		12)	
13)		13)	
14)		14)	
15)		15)	
16)		16)	
17)		17)	
18)		18)	
19)		19)	
20)		20)	