

House to House Collections Form of Statement - East Dorset area

Name of the person to whom the permit was granted	
Address of the person to whom the permit was granted	
Name of the charity or fund which is to benefit	
Date of Collection	

Proceeds of Collection (Please shown NIL entries	Amount	Total	Expenses and Application of Proceeds	Amount	Total
From Collecting Boxes			Printing and Stationery		
Interest on Proceeds			Postage		
Other Items:-			Advertising		
_____			Collecting Boxes		
_____			Badges		
			Emblems		
			Other Items:-		

			Payments approved under Regulation 15(2) Disposal of Balance (insert particulars)		

Certificate of 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 for the proceeds of the collection.

Signed: Dated:

Certificate of Accountant

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: Dated:Qualifications: