

SCHEDULE REFERRED TO IN REGULATION 16



FORM OF STATEMENT RESPECTING STREET COLLECTIONS

Name & Address of person to whom Permit was granted

Name:.....

Address:.....

.....

Name of Charity or Fund which is to benefit:.....

Address of Charity or Fund if different from above:.....

.....

Date of Collection or Sale:.....

**STATEMENT OF INCOME AND EXPENDITURE
PLEASE SHOW NIL ENTRIES**

INCOME	AMOUNT	TOTAL	EXPENDITURE	AMOUNT	TOTAL
	£ p	£ p		£ p	£ p
From Street Collection or Sale as per list of Collectors and Vendors and amount attached hereto.					
			Printing Stationery &		
From other sources			Postage's		
Bank Interest			Advertising		
Other items viz.			Street Collection Boxes and Carriage		
			Badges or other adornments		
			Other items (if any)		
			Disposal of Balance (insert particulars)		
TOTAL			TOTAL		

Certificate of the person to whom 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 other responsible person.

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:.....