



Financial Statement for Street Collections

Permit Holder: _____

Address: _____

Name of the Charity/Fund, which the collection will go to: _____

Date of the Collection: _____

Fill in all areas where there is no income or expense against any item – write 'NIL'

| Income | Amount | Total | Expenses | Amount | Total |
|-----------------------------|----------|-------|--|----------|-------|
| From collection boxes | | | Printing and Stationery) | | |
| | | | Postage) | | |
| Bank interest on collection | | | Advertising) | | |
| | | | Collecting Boxes) | | |
| | | | Badges) | | |
| | | | Emblems) | | |
| Other items: | | | Other items : | | |
| | | | | | |
| | | | | | |
| | | | Payments approved under Regulation 15 (2) | | |
| | | | Amount given to Charity/Fund (Insert particulars) | | |
| TOTAL | £ | | TOTAL | £ | |

Statement by Permit Holder

To the best of my knowledge and belief the above is a true account of the income, expenses and balance of the collection given to the Charity/Fund.

Dated _____ Signed _____

Statement by Accountant

I have obtained all the information and explanations required by me and the above is in my opinion a true account of the income, expenses and balance of the collection given to the Charity/Fund.

Dated _____ Signed _____

Qualifications _____

This Return when complete should be sent to: High Peak Borough Council, Licensing & Land Charges, Town Hall, Market Place, Buxton, Derbyshire, SK17 6EL

Fax: (01298) 27639