

HOUSE TO HOUSE COLLECTION

ACCOUNTANT'S CERTIFICATE/DECLARATION OF MONIES BANKED

This form must be returned within one month of the collection date.

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							
Date of collection							
		Show NI	L entries				
PROCEEDS OF	AMOUNT	TOTAL	EXPENSES AND	AMOUNT	TOTAL		
COLLECTION	£	£	APPLICATION OF	£	£		
From collection			PROCEEDS				
boxes			Printing & Stationery				
Interest on proceeds			Postage				
Other items:			Advertising				
			Collection Boxes				
			Badges				
			Emblems				
			Other items:				
			Dovmonto				
			Payments Disposal of balance				
			(insert particulars)				
TOTAL			TOTAL				
		<u> </u>					
Certificate of the pers	on to whom	the perm	it 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:				

Please complete one section only

1.	Accountant's Certificate				
	Full name of accountant:				
	Full business address:				
	Postcode:				
	Professional qualification(s):				
	I certify that the total amount (£ :) declared collected by:				
	in connection				
	with the charitable appeal in aid of:				
	agrees with the bank stamped copy(ies) of paying-in slip(s) shown to me.				
	Signed: Date:				
2.	Confirmation by Bank				
	Full name of authorised bank official:				
	Name of bank and branch address:				
	Sort code:				
	I certify that a total amount of £ : in connection with the charitable appear				
	in aid of:has been credited to account				
	number: Name of account:				
	held at this branch.				
	Signed: Bank stamp and date:				
3.	Copies of original paying-in slips attached				
	State number of slips attached: These will be returned to you if you enclose a stamped addressed envelope.				

The Council may make such checks and share information with the Police, other Authorities or the Charity Commission to verify information.

List of Collectors

(As required by Regulation 14(3) of the City Council's Street Collection Policy)

Box No.	Name of Co	llector	Amount Collected
		Total Collected	

If you have any queries on this returns form, please contact Licensing Department 01392 265702, email licensing@Exeter.gov.uk.

Please return to: Licensing Department, Exeter City Council, Civic Centre, Paris Street, Exeter EX1 1RQ.