



**FORM OF STATEMENT – APPLICABLE TO HOUSE TO HOUSE COLLECTION**

**(This form must be completed and returned within one month of the date of the collection)**

**Name of the person to whom the permit was granted .....**

**Address of the person to whom the permit was granted.....**

.....

**Name of charity or fund which is to benefit**

.....

**Date of collection.....**

**Towns in which collection took place .....**

.....

**Show nil entries**

Proceed of Collection	Amount £	Total £	Expenses and Application of Proceeds	Amount £	Total £
From collectors, as in lists of Collectors and amounts attached hereto			Printing and Stationery		
			Postage		
			Advertising		
Interest on proceeds			Collecting Boxes		
			Badges		
Other Items (if any)			Other Items (if any)		
			Disposal of Balance (attach particulars) and provide receipt/ bank paying-in slips		
<b>TOTAL</b>	£		<b>TOTAL</b>	£	

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 to which it relates.

Dated.....Signed .....

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Certificate of accountant or other responsible person.

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

Dated.....Signed.....Print Name.....

Address .....

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Licensing Team  
East Suffolk Council  
Riverside  
4 Canning Road  
Lowestoft  
Suffolk  
NR33 0EQ

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