

### Certificate of accounts

Licence number:	
Name and 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	Amount	Total	Expenses & application of proceeds	Amount	Total
From collecting boxes			Printing & stationery		
			Postage		
			Advertising		
			Collecting boxes		
Bank interest on proceeds			Badges		
			Emblems		
Other items:-			Other items:-		
			Payments approved under Regulation 15(2)		
			Disposal of balance (insert particulars)		
Total	£		Total	£	

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

Return to: Environmental Health, Licensing, Hinckley Hub, Rugby Road, Hinckley, Leicestershire, LE10 OFR

Email: [esadmin@hinckley-bosworth.gov.uk](mailto:esadmin@hinckley-bosworth.gov.uk) Tel: 01455 255946

Complete over....

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.

Date: ..... Signed: .....

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.

Date: ..... Signed: .....

Qualifications:-