



## Regulations With Regard To Street Collections Form of Statement

Name of person to whom the permit was granted

Address of the person to whom the permit was granted

Postcode:

Name of the charity or fund which is to benefit

Date of collection .....

Area of collection .....

**Please show nil entries.**

PROCEEDS OF COLLECTION	AMOUNT	TOTAL	EXPENSES AND APPLICATION OF PROCEEDS	AMOUNT	TOTAL
From collecting boxes as per list of collectors and amounts shown overleaf*			Printing and stationery		
			Postage		
			Advertising		
Interest on proceeds			Collecting boxes		
Other items:-			Badges and emblems		
			Other items:-		
			Payments approved under regulation 15(2)		
			Disposal of balance (insert particulars)		
TOTAL £			TOTAL		

**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 or an independent responsible person (i.e. Bank Manager)

**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: .....

Name..... Profession.....

**NOTES.**

This form of statement must be completed and returned to the Central Administration Unit at East Northamptonshire Council

After a qualified Accountant or independent responsible person has given the required certificate under paragraph 16.1(a) of the regulations, the permit holder shall, within one month of the collection, at his/her expense, publish in the Northamptonshire "Evening Telegraph" newspaper a statement showing the

- (a) Name of the person to whom the permit had been granted
- (b) Area to which the permit relates
- (c) Name of the charity or fund to benefit
- (d) Amount collected
- (e) Amount of the expenses and payments incurred in connection with such collection.

LIST OF COLLECTORS

No.	Name	ADDRESS	AMOUNT CONTAINED IN EACH COLLECTING BOX
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
TOTAL CARRIED FORWARD *			

**Northamptonshire Licensing Partnership**  
**East Northamptonshire House**  
**Cedar Drive**  
**Thrapston**  
**Northamptonshire NN14 4LZ**  
**Tel: 01832 742102**  
**Fax: 01832 734839 DX: 701611 Thrapston**  
**Email: [licensingunit@east-northamptonshire.gov.uk](mailto:licensingunit@east-northamptonshire.gov.uk)**  
**Website: [www.northantslicensing.gov.uk](http://www.northantslicensing.gov.uk)**