



**SCHEDULE**

**STREET COLLECTION IN THE CITY OF SOUTHAMPTON**

**STATEMENT OF INCOME AND EXPENDITURE**

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: .....

Street collection permit reference number.....

Show nil entries

<b>INCOME</b>	<b>AMOUNT</b>	<b>EXPENDITURE</b>	<b>AMOUNT</b>
From Collection (as per list of collectors and amounts attached hereto)		Printing and Stationery Postage Advertising Street Collection boxes Badges or other adornments Other items	
Interest on proceeds		.....	
Other items:		.....	
.....		.....	
.....		Disposal of balance (insert particulars)	
.....			
<b>TOTAL</b>		<b>TOTAL</b>	

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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) .....  
 Person to whom the permit was granted

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.

(Signed) ..... (Date) .....  
 Qualified Accountant or independent responsible person