

**POLICE FACTORIES ETC  
(MISCELLANEOUS PROVISIONS) ACT 1916**



**FORM OF STATEMENT**

Civic Offices  
Union Street  
Chorley  
PR7 1AL

This form of statement must be returned within one month of the date of the collection. Failure to do so may result in future applications being refused.

<b>Name of person to whom permit was granted:</b>	
<b>Address of person to whom permit was granted:</b>	
<b>Name of charity or fund which is to benefit:</b>	
<b>Date of collection:</b>	

**SHOW NIL ENTRIES**

<b>Proceeds of Collection</b>	<b>Amount</b>	<b>Total</b>	<b>Expenses &amp; application of proceeds</b>	<b>Amount</b>	<b>Total</b>
<b>From collecting Boxes</b>			<b>Printing &amp; Stationery Postage Advertising</b>		
<b>Interest on proceeds</b>			<b>Collecting Boxes Badges Emblems</b>		
<b>Other items</b>			<b>Other items</b>		
			<b>Payment approved under Regulation 15 (2) of the Street Collection Regs Disposal of Balance (insert particulars)</b>		
<b>TOTAL</b>			<b>TOTAL</b>		

**Certificate of the person to whom the permit was issued**

I certify that, to the best of my knowledge and belief, the above is a true statement 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: \_\_\_\_\_

**If you need any help in reading or understanding this document, please ask us.  
We will provide a copy or a summary on tape or in large print if requested.**