# HOUSE-TO-HOUSE COLLECTIONS ACT, 1947 CIVIC GOVERNMENT (SCOTLAND) ACT 1982

SUMMARY OF PROCEEDS OF A HOUSE-TO-HOUSE COLLECTION

Corps/Appeal Project............................................................................... Division ..........................................................................

Local Authority......................................................................................... Sheet No ........................................................................

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Proceeds of collection | | Cash/cheques | | Credit Card | | Record CAF number, BUT do not complete the voucher/CAFs must be sent to THQ for transaction | | Date sent to THQ | Total Income | |
| £ | p | £ | p | £ | p |  | £ | p |
| Brought forward | |  |  |  |  |  |  |  |  |  |
| F2 Sheet number/s | Area |  |  |  |  |  |  |  |  |  |
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| Sub-total  Deduct returned cheques    Total (Take to line 1 on F5 or carry forward) | |  |  |  |  |  |  |  |  |  |
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We hereby certify that, to the best of our knowledge and belief, the particulars given on forms F1 and F2 are correct and that the collecting boxes and envelopes have been opened, and the contents counted and recorded, in the presence of two persons. **This form MUST be signed by two people**

Signed Position

Signed Position

Date

HOUSE-TO-HOUSE COLLECTIONS ACT, 1947 CIVIC GOVERNMENT (SCOTLAND) ACT 1982

#### RECORD OF CERTIFICATES OF AUTHORITY, BADGES, COLLECTING BOXES, RECEIPT BOOKS AND ENVELOPES ISSUED TO COLLECTORS

Corps/Appeal Project............................................................ Division..................................................... Sheet No .......................

Local Authority...................................................................... Area ..................................................................................................

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| TO WHOM ISSUED | Date permit issued | Date permit returned | No of collecting box | No of receipt book | No of envelopes issued | No of envelopes returned | Amount collected | |
| £ | p |
| Brought Forward |  |  |  |  |  |  |  |  |
| Name |  |  |  |  |  |  |  |  |
| Address |  |  |  |  |  |  |  |  |
| Tel |  |  |  |  |  |  |  |  |
| Name |  |  |  |  |  |  |  |  |
| Address |  |  |  |  |  |  |  |  |
| Tel |  |  |  |  |  |  |  |  |
| Name |  |  |  |  |  |  |  |  |
| Address |  |  |  |  |  |  |  |  |
| Tel |  |  |  |  |  |  |  |  |
| Name |  |  |  |  |  |  |  |  |
| Address |  |  |  |  |  |  |  |  |
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| Name |  |  |  |  |  |  |  |  |
| Address |  |  |  |  |  |  |  |  |
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| Name |  |  |  |  |  |  |  |  |
| Address |  |  |  |  |  |  |  |  |
| Tel |  |  |  |  |  |  |  |  |
| Name |  |  |  |  |  |  |  |  |
| Address |  |  |  |  |  |  |  |  |
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| Address |  |  |  |  |  |  |  |  |
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| TOTAL (Take to F1, column C or carry forward) | | | | | | |  |  |

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| --- | --- | --- |
| Represented by **(If you are carrying forward complete this information on the last form in the area)**. | Cash/cheques banked (Take to F1) |  |
| Credit Card/CAF Vouchers sent to THQ (Take to F1) |  |

# STREET COLLECTIONS

#### RECORD OF COLLECTION PERMITS AND COLLECTING BOXES ISSUED TO COLLECTORS

Police, Factories etc (Miscellaneous Provisions) Act, 1916; Local Government Act, 1972 Metropolitan and City Police District Regulations, 1979 and (Amendment) Regulations, 1986

The Charitable Collections (Transitional Provisions) Order, 1974 As Amended in Council, 1992 Model Regulations

Public Charitable Collections (Scotland) Regulations, 1984, Public Charitable Collections (Scotland) Amendment Regulations, 1988

Corps/Appeal Project............................................................................... Division ..........................................................................

Local Authority...................................................................................................................................................................................

Collection site ....................................................................................................................................................................................

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| TO WHOM ISSUED | Date permit issued | Date permit returned | No of collecting box | Amount collected  £ p | |
| Brought forward |  |  |  |  |  |
| Name |  |  |  |  |  |
| Address |
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| Name |  |  |  |  |  |
| Address |
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| Name |  |  |  |  |  |
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| Name |  |  |  |  |  |
| Address |
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| Total (Take to Line 2 column C on F9 or carry forward) | | | |  |  |

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| --- | --- | --- |
| Represented by **(If you are carrying forward complete this information on the last F3 form)**. | Cash/cheques banked (Take to F5, column A) |  |
| Credit Card/CAF Vouchers sent to THQ (Take to F5, column B) |  |

We hereby certify that, to the best of our knowledge and belief, the particulars given above are correct and that the collecting boxes have been opened, and the contents counted and recorded, in the presence of two persons.

**This form MUST be signed by two people**

Signed Position

Signed Position

Date

**ALL OTHER INCOME** (Donations and other fundraising events.)

\* Please list the ‘other income’ type breakdown separately on this form indicated as follows; Income from General donations should be coded – **D**

Income from fundraising events such as auctions, talent night, coffee mornings, jumble sales etc. should be coded – **E**

Transfers from Corps funds e.g. Charity Shop monies, should be coded – **T**

Corps/Appeal Project................................................. Division ..........................................................................

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date  Banked | Details | **\***  D / E / T | Cash/cheques | | CC/CAF sent to THQ | | Total Income | |
| £ | p | £ | p | £ | p |
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| Total (Take to line 3 on F9) | |  |  |  |  |  |  |  |

## BANKING RECORD

Corps/Appeal Project............................................................................... Division ..........................................................................

Bank Account ref no ......................................................

Users of Protech should input F4 data as soon as monies are banked, all those who fill out the forms manually should fill in the main F6 form at the end of the Appeal, where Gift Aid recording should also be made.

To enable The Salvation Army to claim the Gift Aid tax refund, details of donation amounts and the batch number must be recorded.

The Total amount banked column must equal the cumulative total. This total must be transferred to sheet F5

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date banked | Amount banked | | Paying in slip No and paid in by or area name | Cumulative total | | Gift Aided Donations | | |
| £ | p | £ | p | Amount | | Batch No |
|  | | | Brought forward |  |  | £ | p |  |
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| TOTAL |  |  | CUMULATIVE TOTAL |  |  |  |  |  |

Carried forward to Sheet no

### THE SALVATION ARMY

United Kingdom Territory with the Republic of Ireland

A registered charity No. 214779, and in Scotland SC009359

## THE BIG CONNECTION 2025

**SUMMARY STATEMENT**

Corps/Appeal Project............................................................................... Division ..........................................................................

COLUMN A

|  |  |
| --- | --- |
| INCOME | Details from Form |
| House-to-House collections | F1 (paper) |
| Street collections | F3 (paper) |
| Other income | F4 (digital) |
| GROSS INCOME | |

COLUMN B

COLUMN C

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Cash & cheques banked § | |  | Credit Card & CAF vouchers \* | |
| £ | p | £ | p |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |

|  |  |
| --- | --- |
| TOTAL INCOME | |
| £ | p |
|  |  |
|  |  |
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|  |  |
|  |  |



Less expenses claimed # NET INCOME

CHECKED BY THQ

BIG CONNECTION OFFICER

NOTES

§ Gross income in Column A should agree with Banking Record F4.

# Enter total expenses and then deduct from gross income. **This is for THQ information only.**

**This form MUST be signed by two people**

Signed Position

Signed Position

Date