



DECLARATION FORM

FOR **WARD** finances

This form is to be used to declare costs that have been made by members in behalf of Priesthood and Auxiliary Organizations.

Personal information:*						
Name:						
Address:						
Postal code:		Place:				
BIC/SWIFT code:		IBAN Account	nr.:			
E-mail address						
In name of:						
Date:	ate:)	
Concerns:	oncerns: (activity e/o period)					
Oragnization:						
Payment reference:						
AMOUNTS TO DECLARE						
Name Organization/Company		Description:				Amount in €
				,		
				Total i	n Euro's	
Total in Edito 5						
This form needs to be filled in completely and supplied with the original bills and/or receipts (attached to the right backside of form). Use only one form per organization. This must be signed (right top) by both yourself and by the President of the Organization. Also have						
the Bishop sign the form Incomplete forms , and	١.					
have consulted with, a	and have	approval from the		ii iiot be pi	aid odt,	unicss you
Hand the form over to the Ward Clerk. Approval Pres. of Organization: Not to be filled in, reserved for administration.						
Approval Pres. of Organization		ot to be filled in, reserve ceived (date):	Fund/Category:		Membership number:	
	Re	cerved (date).	Fund/Category.		Membersi	np number.
Approval Bishop:						
1 1pprover Distrop.	Da	te entered in MLS	Clerk signature		ı	
		ic entered in MES	Clerk signature			