**Declaration**

**Declaration number**: D2526

**Name**: \_\_\_

**Function**: \_\_\_

**Date of declaration**: \_\_\_

|  |  |  |
| --- | --- | --- |
| **Description** | **Amount in €** | **Date purchases** |
|  |  | Date of purchase |
|  |  | Date of purchase |
|  |  | Date of purchase |
|  |  | Date of purchase |
|  |  | Date of purchase |
|  |  | Date of purchase |
| **Total** | € 0,00 |  |

**Choose**: [ ]  Cash [ ]  IBAN: \_\_\_

In name of: \_\_\_

Send this document in Word format to penningmeester@dsz-wave.nl

Please include pictures of receipts including date below. Cross your personal purchases and write or type the new amount on the receipt.