CHRISTMAS CELEBRATIONS Acquittance for Distribution of Clothes Gift Packets

List of Beneficiaries from:				
Name of the Church/Prayer Hou	<u>se:</u>			
Address:				
Church Head Contact Details: M	lobile No	Land line No)	
E-Mail ID:				
Name of the		Complete Address	Food	Sign b

S. No	Name of the Beneficiary	S/o. / D/o. / W/o	Age	Occupation	Complete Address & Mobile No.	Food Security Card details (if available)	Sign by the Head of the Family

S. No	Name of the Beneficiary	S/o. / D/o. / W/o	Age	Occupation	Complete Address & Mobile No.	Food Security Card details (if available)	Sign by the Head of the Family

Note: Proforma should be submitted in 3 sets to the Collector concerned. Church Head and Committee Members/Elders should sign.

President/Secretary (if no committee existing) Church Elders

Appointed Officer Signature,
with Seal

Name & Designation: Sign:

Name & Designation: Sign:

Name & Designation: Sign:

CERTIFICATE

This is to certify that, the above mentioned beneficiaries to whom _____ number of Gift Packets have been distributed to the families of poor people & to the downtrodden etc., comes under Below Poverty Line.

Signature & Seal (President - CCOC) Mobile: Signature & Seal (General Secretary - CCOC) Mobile: