## Declaration form 2023-2024

Number:

GANYMEDES	Signature treasurer:				
* LOBT STURING WERENTCH					
	Date received://				
	Date paid://				
Don't write above					
Details declarer					
Name:					
Street:					
Postcode:	City:				
E-mail addresse:					
Telephone number:					
IBAN:					
Name accountholder:					

## Description declaration:

Reason (ex. which activity):		
Date:	Costs:	
Description costs		

NB. Attach the bill to the back of this form

Declarations that are not sent within 30 days from the date on the bill, will automatically be seen as a gift to the association.

## Signature

Place:

Signature: