

CONFIRMATION MONEY RECEIPT

Help Ghana Foundation



Name of the project		
Date and place		

The undersigned:
*At least two people responsible for the project must complete and sign this form.
 After signing, a copy must be send to the Help Ghana foundation.*

	Full name	Job title
1.		
2.		
3.		
4.		

hereby confirm on behalf of the following organization:

Name of organisation	
Address	
Place	
Country	

the receiving of the following amount:

GHc		EURO	
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The money has been received:

Date	
Name of bank	
Bank account number	

Signed, *

1.		3.	
2.		4.	

* By signing the form you agree to use the funds according to the project specifications in the questionnaire. If it proves necessary to use the funds in any other way, you must first contact the Help Ghana Foundation for consultation.