RECORD OF FEE INCOME Parochial Fees

2023



Date	Fee Code	Family Name(s)	Name of Church (only required if form applies to	Name of Officiant	Retired Clergy?	DBF Fee £	PCC Fee £	Retired	
		MONTH / QUARTER:				, ,			_
	CON	TACT DETAILS (Tel./email):					or email: fees@bathwells.anglican.org		
		FEES CONTACT NAME:				01749 670777			
INCUMBI	ENT/PRI	EST IN CHARGE/VACANCY:				Any queri	es, please co	ontact	
	Е	BENEFICE/TEAM MINISTRY:					found on the separate "Record of Fee Income" table.		
	PARISH	(if not for whole benefice):					te: all refere user notes co		5,
						Please no	te: all refere	,	nce codes

MONTH / QUARTER:						fees@bathwells.anglican.org			
Date	Fee Code	Family Name(s)	Name of Church (only required if form applies to multiple churches)	Name of Officiant (Please indicate if "PTO")	Retired Clergy? Y/N	DBF Fee £	PCC Fee £	Retired Clergy Fee £	
Declaration & Signatures I declare that all information provided on this form is true, correct and			Office use only	Payment Method					
agreed to the parish records and registers. PCC Signature				Cheque Enclosed		BACS Details (Send DBF Fee to			
Incumbent Signature			Date://22	Paid by BACS	1	ONLY): Bath & Wells Sort Code:			
Date			Complete:	Please quote your parish name and "Ff reference when making BACS payment		Account No:			
					•				