

Local Council name: BRACON ASH & HETHEL PARISH COUNCIL**Confirmation regarding the exercise of electors' rights**

Please advise the auditor if it is necessary to change the appointed date. (See section 7 of the covering letter.)

~~The appointed date specified by the auditor, 31 July 2015, has been amended to~~ / /2015.

Signed: _____ Date: _____

Position held: _____

Confirmation of contact details

Please confirm the contact details for the Clerk, RFO (if not the clerk) and Chairman, to assist us in ensuring that our records are kept up to date:

Clerk's name: <u>CAROLE JOWETT</u>	RFO's name (if not clerk) <u>AS CLERK</u>	Chair's name <u>COLIN RUDD</u>
Address: <u>29 CHURCHFIELDS</u> <u>HETHERSETT</u> <u>NORWICH</u> <u>NR9 3AF</u>	Address:	Address: <u>THE MOAT HOUSE</u> <u>HETHEL</u> <u>NORWICH</u> <u>NR14 8HD</u>
Telephone: Home: <u>01603 812708</u> Work: <u>01918 656568</u>	Telephone: Home: Work:	Telephone: Home: <u>01508 570149</u> Work:
e-mail: <u>carole.jowett@</u> <u>btinternet.com</u>	e--mail:	e-mail: <u>colles@hethelmoat.</u> <u>reeserve.co.uk</u>

Please return this form in the envelope provided, together with the Annual Return and other information requested.