

Form 68

Claim by a Charity for Repayment of Withholding Tax Deducted



Name and Address of Charity (Incl. Eircode)

Period of Claim

From

To

Return Address

Charity Claims Unit
Office of the Revenue Commissioners
Personal Division
Government Offices
Nenagh
Co. Tipperary
E45 T611

Official Use Only

FC File

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Warrant No.

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Refund Amount €

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Basic Details

Name of Charity

Charity Reference Number

CHY

Address of Charity
(BLOCK LETTERS)

Contact Name

Contact Telephone Number

Declaration which must be signed by a Trustee / Director / Officer

I DECLARE that the Withholding Tax on this form is the income of the charity and will be applied to charitable purposes only and I now claim its repayment amounting to

€

Signature

Date

Capacity

(Trustee / Director / Officer)

