



PAYMENT RECEIPT FOR THE ANIMAL PROTECTION OFFICER

LAST NAME: ..... FIRST NAME: .....

ADDRESS: .....

COUNTRY: .....

DATE OF BIRTH: .....

AREA OF OPERATIONS: .....

AMOUNT: .....  
(in numerals) (in words)

Is authorised to undertake all measures for the improvement of animal protection in the country listed above as an animal protection officer for "Tierschutz geht uns alle an" ("Animal protection concerns us all").

There are no obligations for either party. There will be no reimbursements to the animal protection officers. The donated funds may be used freely in the interests of animal protection.

If the donated funds are used improperly, no further support in the interests of animal protection will be provided.



DATE: ..... SIGNATURE: .....