

**2026 CIF Membership Subscription - Statement of Turnover
Accountant/Auditor Verification**

**Please insert company details below*

Company Name: _____

Turnover Categories

€			€		
A	0	- 300,000	J	12,000,001	- 14,500,000
B	300,001	- 500,000	K	14,500,001	- 18,000,000
C	500,001	- 810,000	L	18,000,001	- 22,500,000
D	810,001	- 1,200,000	M	22,500,001	- 31,500,000
E	1,200,001	- 2,500,000	N	31,500,001	- 45,000,000
F	2,500,001	- 4,500,000	O	45,000,001	- 72,000,000
G	4,500,001	- 7,000,000	P	72,000,001	- 108,000,000
H	7,000,001	- 9,000,000	Q	108,000,001	- 180,000,000
I	9,000,001	- 12,000,000	R	180,000,001	+

We, the undersigned, confirm that the above-named company's turnover, as set out in its audited financial statements for the period ended * _____ is
€ _____

* Note: The Turnover Category should be based on the accounts total turnover figure in respect of the company's financial year ending on or before 31st March 2025.

Accountant/Auditor Name: _____

Address: _____

Signature: _____

Date: _____

Stamp: