

COMMUNITY DONATION AND SUPPORT ACQUITTAL FORM

APPLICANT DETAILS

Grant Recipient
Postal Address
Contact person
Telephone (business hours)
Email

PROJECT OUTCOME REPORT

Amount of funding received	Year received
Grant purpose (briefly describe the purpose for words)	or which you received your grant – max 200

PROJECT DETAILS

Project Start Date		Project Completion Date				
Total Project Cost						
How many people benefited / participated in the project						
Number of volunteers	Est: Volunteer hours	Est: Value volunteer hours (calculated at \$47 per hour)				
Briefly describe project achievements for the community and any issues encountered (max 200 words)						





COUNCIL ACKNOWLEDGEMENT

Acknowledgement of Council is required for all grants. Detail how Council's support for this
project was acknowledged. Please list and attach any materials developed as a part of your
project e.g., media coverage, publicity, flyers, signage etc.

proj	ect e.g., media coverage, publicity, flyers, signage etc.	
Ac	ctivity	
	•	
PRC	OJECT INCOME AND EXPENDITURE STATEMENT – GST Inc.	
	ase include an income and expenditure statement in the table be mples prior to submission.	low. Please remove
Re	evenue	GST Inc.
	ample: Sponsorship (inc. Carpentaria Shire)	
Exa	ample: Ticket sales	
ТО	TALREVENUE	
	penditure	
	ample: Catering	
	ample: Hire of equipment ample: Promotional material / advertising	
LXa	ample. Fromotional material / advertising	
ТО	TAL EXPENDITURE	
fund	ou received a financial grant, did you fully expend your grant? No ds above \$100 must be returned to Council. Yes No I confirm that receipts can be produced on request if required.	te: Any unexpended
CHE	ECKLIST	
Hav	ve you included:	
	Copies of marketing and promotional materials	
	Images of your project	
	Proof of acknowledgement of Council support	





GRANT RECIPIENT DECLARATION

To be signed by your organisation's treasurer or appropriately delegated officer or independent auditor.

I certify that the above statement of Income and Expenditure Statement provides a true record of this project.

I certify, to the best of my knowledge and information that the details provided in this acquittal and associated documentation are true and correct.						
Name						
Position						
Signature	Date (DD/MM/YY)					
OFFICE USE ONLY						
Further action required	Officer:					
Yes – specify	Signature:	Date: (DD/MM/YY)				

