**Office Use Only**

|  |  |
| --- | --- |
| Our Reference |  |
| Date Received  |  |

## 2023/24 COMMUNITY FUNDING

## ACQUITTAL REPORT

**FUNDING INFORMATION**

**Funding Details**

|  |  |
| --- | --- |
| **Name of Project** |       |
| **Funding Amount**  |       |
| **Funding Reference No.** |       |

**Organisation’s Details**

|  |  |
| --- | --- |
| **Name of Organisation** |       |
| **Address** |       |
|  |       | **Postcode** |       |
| **Website** |       |

**Auspicing Organisation’s Details (if relevant)**

|  |  |
| --- | --- |
| **Name of Organisation** |       |
| **Address** |       |
|  |       | **Postcode** |       |
| **Website** |       |

**Contact Person – responsible for the daily co-ordination of the project**

|  |  |
| --- | --- |
| **Name** |       |
| **Organisation** |       |
| **Position** |       |
| **Mobile** |       |
| **Email** |       |

**DECLARATION**

I declare that the 2023/24 Community Funding Program amount of $      provided by the Shire of Gingin has been spent in accordance with the purpose and conditions for which it was granted and that the financial statements are a true and fair record of the transactions for this project.

|  |  |
| --- | --- |
| **Name**  |       |
| **Signature**  |       |
| **Date** |       |

**2023/24 COMMUNITY FUNDING PROGRAM EVALUATION REPORT**

If you feel that you will require more space than that provided on the attached forms, please present your entire Evaluation Report on plain A4 paper.

1. **Briefly describe what the funds were expended on.**

|  |
| --- |
|       |

1. **Outline the impact of the project on the community/attendees (include any post evaluation and**

**feedback from the community)**

|  |
| --- |
|       |

1. **What acknowledgement did the Shire of Gingin receive as a result of this funding? Please attach**

**copies of flyers, news articles, social media screenshots, etc.**

|  |
| --- |
|       |

Please complete the Financial Report on the next page and return this acquittal along with:

* Copies of invoices/receipts
* Photos/flyers/clippings showing evidence of Shire inclusions in promotions
* Invoice for second installation of grant funding (50% of granted amount, dependant on actual expenditure)

**2023/24 COMMUNITY FUNDING PROGRAM**

**FINANCIAL REPORT**

|  |  |
| --- | --- |
|  | All amounts GST exclusive |
| Whole of project Costs | In-Kind**Contribution** | BUDGET$ | ACTUAL$ |
| INCOME |  |  |  |
| 2023/24 Shire Community Funding |  |       |       |
| Own (Applicant’s Contribution) |  |       |       |
| Other Grant (Lotterywest, Department of Communities, etc.) - |  |       |       |
| Sponsorship (local business, donations, etc.)-  |  |       |       |
| Other (please list)       |  |       |       |
| TOTAL INCOME |  |       |       |
|  |  |  |  |
| EXPENDITURE | Important: *Project expenditure needs to align with items listed in grant application that this funding is to support.* |
| Advertising and Promotion |  |       |       |
| Transport |  |       |       |
| Equipment |  |       |       |
| Administration Costs/Public Liability Insurance |  |       |       |
| Presenters/Speakers |  |       |       |
| Venue Hire |  |       |       |
| Other (please list)       |  |       |       |
|       |  |       |       |
|       |  |       |       |
|       |  |       |       |
|       |  |       |       |
| **TOTAL EXPENDITURE** |  |       |       |
|  |  |  |  |
| **SURPLUS\* / DEFICIT** |  |       |       |

**\* PLEASE NOTE:** If there are any surplus funds noted on your acquittal report, the Shire will invoice your organisation for the unspent amount.

**Shire of Gingin**

**Community Services Team**

**PO Box 510**

**GINGIN WA 6503**