**Office Use Only**

| Grant Reference Number: |  |
| --- | --- |
| Date Received:  |  |
| Acknowledged: |  |

# Thank a Volunteer Day Celebration Grants Program - Acquittal Report

## Section One - General Information

**1.1 Grant Details**

|  |  |
| --- | --- |
| Name of project organisation: | Click here to enter text. |
| Grant amount $ | Click here to enter text. |

**1.2 Applicant’s Details**

|  |  |
| --- | --- |
| Legal name of organisation: | Click here to enter text. |
| Trading name (if applicable): | Click here to enter text.  |
| Postal address: | Click here to enter text. |
| Suburb: | Click here to enter text. | Postcode: | Click here to enter text. |

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

|  |  |
| --- | --- |
| Name | Click here to enter text. |
| Position | Click here to enter text. |
| Telephone | Click here to enter text. |
| Email | Click here to enter text. |

## Section Two - Declaration

I declare that the Thank a Volunteer Day Celebration Grants Program funding of $ Click here to enter text. (ex GST) provided by the Department of Communities 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.

I agree that all documentation pertaining to the program, including copies of receipts and audited financial statements, will be retained for a minimum of twelve months and be made available to the Department of Communities or their auditors on request.

| Legally authorised officer name:  | Click here to enter text. |
| --- | --- |
| Legally authorised officer position:  | Click here to enter text. |
| Legally authorised officer telephone: | Click here to enter text. |
| Legally authorised officer signature: | Click here to enter text. |

## Section Three - Project evaluation

Please read all of the questions before you start writing your responses.

**3.1 Date of event:** Click here to enter text.

**3.2 Briefly describe your event, outlining how volunteers were acknowledged and celebrated.**

Click here to enter text.

**3.2 Please list the community organisations and agencies that you partnered with to deliver the event. Describe how the organisation supported the project.**

|  |  |
| --- | --- |
| **Names of Partner Organisation/Agency** | **How did the partner organisation/agency support your event?** |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. |

**3.3 How many volunteers from the following types of organisations attended the event.**

|  |  |
| --- | --- |
| **Type of Volunteer Group** | **Number of volunteers from this type of group who attended the event** |
| Health | Click here to enter text. |
| Sporting | Click here to enter text. |
| Community Service | Click here to enter text. |
| School | Click here to enter text. |
| Service Clubs (e.g. Lions, Rotary) | Click here to enter text. |
| Emergency Services | Click here to enter text. |
| Other | Click here to enter text. |
| **Total** | Click here to enter text. |

**3.4 What was the most significant outcome for volunteers and your community as a result of holding the event?**

Click here to enter text.

**3.5 Please provide a brief summary of any feedback you received from event participants.**

Click here to enter text.

**3.6 If an evaluation of the project was completed, please attach the results to this acquittal form.**

**3.7 If available, please attach a photo(s) of the event to this form.**

**3.8 What acknowledgement did the Department of Communities receive as a result of this grant? Please provide details – for example the publication and date.**

Click here to enter text.

**3.11 Are there any comments you would like to make about the grant program or the grant application process?**

Click here to enter text.

## Section Four - Financial Reporting

|  |  |  |
| --- | --- | --- |
|  | **BUDGET ($)** | **ACTUAL ($)** |
| **INCOME** |  |  |
| Thank a Volunteer Day Celebration Grant  | Click here to enter text. | Click here to enter text. |
| Other (include any in-kind support and identify it as in-kind | Click here to enter text. | Click here to enter text. |
|  | Click here to enter text. | Click here to enter text. |
| **TOTAL INCOME**  | Click here to enter text. | Click here to enter text. |
| **EXPENDITURE**  |  |  |
| Eg. Advertising and promotion | Click here to enter text. | Click here to enter text. |
| Transport | Click here to enter text. | Click here to enter text. |
| Equipment  | Click here to enter text. | Click here to enter text. |
| Venue hire | Click here to enter text. | Click here to enter text. |
| Catering | Click here to enter text. | Click here to enter text. |
| Other (include any in-kind expenditure and identify it as in-kind | Click here to enter text. | Click here to enter text. |
|  | Click here to enter text. | Click here to enter text. |
| **TOTAL EXPENDITURE** | Click here to enter text. | Click here to enter text. |
| **SURPLUS\*/DEFICIT** | Click here to enter text. | Click here to enter text. |

**\*If you have any surplus funds, please contact the Department of Communities prior to the submission of this acquittal report to discuss.**