Outstanding Individual Assistance Grant Acquittal Form

Submit within 60 days of completing the activity.

Purpose of this form
Use this form to report on how the grant was spent. Attach evidence of one item of evidence such as event result, certificate, program, photo, travel receipt or registration confirmation. A short comment on the benefit of the opportunity. Failure to acquit a grant may make the organisation ineligible for future Shire funding.

1. Grant and Application details	
Application name	
Activity	
Grant amount approved	$
Contact person	
Position / role	
Phone	
Email	

2. Activity delivery	
Did you attend or participate?	☐ Yes ☐ No ☐ Partly – explain why and advise what funds need to be returned.
What was the outcome? Briefly describe participation, result, experience or achievement.	

3. Evidence of activity attached	
Please confirm	☐ Certificate ☐ Program ☐ Photo ☐ Result ☐ Receipt ☐ Travel evidence ☐ Other……

May the Shire use supplied photos or information for reporting or promotion?	☐ Yes ☐ No ☐ Yes, subject to the following conditions: _____

4. Declaration

Acquittal declaration

I declare the information is true and any unspent funds have been returned or will be returned as requested.

Authorised representative name	
Position	
Signature	
Date	

Lodgement

Submit the completed form and attachments to:

Email	mail@coolgardie.wa.gov.au
Post	Community Assistance Fund, Shire of Coolgardie, PO Box 138, Kambalda WA 6442
Phone enquiries	(08) 9080 2111

Office use only

Date acquittal received	
Reviewed by	
Financial evidence satisfactory?	☐ Yes ☐ No ☐ Further information requested
Project outcomes satisfactory?	☐ Yes ☐ No ☐ Further information requested
Shire acknowledgement evidence supplied?	☐ Yes ☐ No ☐ Not applicable
Unspent funds to be returned?	☐ No ☐ Yes - amount: $_____
Acquittal closed date	
Notes / follow-up actions	