

## COMMUNITY GROUP GRANTS ACCOUNTABILITY FORM

- All recipients of funds from Council must complete this form within 6 months of applying for the grant.
- If you do not complete and return this form with supporting receipts you will not be eligible for future funding through Council.

1. **Name of applicant:** \_\_\_\_\_

2. **Name and location of project:** \_\_\_\_\_

3. **Date of project:** \_\_\_\_\_

4. **Amount received from Community Group Grants: \$** \_\_\_\_\_

5. **Please give details of how the money was spent. Your contribution to the project and the Community Group Grants funding you received must be account for.**

**Please attach receipts.**

	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

**6. How has the grant helped you to achieve your purpose?**

Please include:

- How your organisation has benefited from the grant
- What progress your organisation has made on achieving its objectives for this project/purpose
- How many people benefited from the grant
- How did the wider community benefit; and
- How you assessed these benefits

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**7. How was Waitaki District Council acknowledged by your organisation?**

(Please include evidence eg Photo, flyer, advert etc)

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**8. Declaration:**

We declare that all details contained in this report are true and correct to the best of our knowledge and that we have the authority to provide it on behalf of our organisation. **(This report needs to be signed by two office holders within the organisation eg Chairperson and Secretary).**

Name:

Name:

Signature:

Signature:

Position:

Position:

Date:

Date:

Please complete this form and return to:

Carole Hansen  
Waitaki District Council  
Private Bag 50058  
OAMARU  
chansen@waitaki.govt.nz