



COMMUNITY ASSISTANCE SCHEME ACQUITTAL REPORT

Organisation Details

Organisation Name:

Contact Name:

Postal Address:

Telephone:

Email:

Project Details

Project Title:

Start Date:

End Date:

Grant Amount:

Project Summary:

What did you do: (The specific activities that took place, where and who participated)

What changes were made? (if any)

What were the actual outcomes? (What you achieved, the effects on participants/beneficiaries in the Project)

What did you learn? (Reasons, challenges and applying learnings to future projects)

Income	
Grant amount received	\$
Other funding sources and amounts	\$
Total Income	\$

Expenditure	
	\$
	\$
	\$
	\$
Total Expenditure	\$
In-kind donations	\$

Please include any support materials, evidence, photographs, stories etc.

Organisation Declaration

To be signed by the Chair or relevant signatory of the organisation.

- I declare I am currently authorised to sign legal documents on behalf of the organisation.
- I declare that all information provided in this report is true and correct.

Signature: _____

Name: _____

Position: _____

Date: _____

Please return this acquittal report and accompanying documentation to the Shire of Mingenew, 21 Victoria Street (PO Box 120) Mingenew WA 6522 or email to cdo@mingenew.wa.gov.au.