

# Acquittal Form

## Morawa Sinosteel Future Fund



You need to return this completed form within 6 weeks following the completion of the project. Failure to do so may make you ineligible to apply for future grants.

### Section 1: Summary of Grant Received

Grant ID Number:		Grant Amount:	\$
Title of Project:			

### Section 2: Grant Recipient Details

Name of Organisation:	
Contact Person:	
Position:	
Business Hours Phone:	
Mobile:	
Email:	

### Section 3: Certification

*To be signed by the President (or equivalent) of the grant recipient's organisation.*

**I certify that the attached project summary and project budget provides a true and fair record of the undertaking and outcomes of this project.**

Name:			
Position:			
Phone:		Mobile:	
Signature:		Date:	





## Section 5: Financials

**Table 1: Total Income Sources including In-Kind Support**

Please provide details and evidence that shows all income, including in-kind support, that was received that supported the successful delivery of this project.	Cost (\$)	Supporting Evidence Attached
Morawa Sinosteel Future Fund Grant – Amount Requested		Yes <input type="checkbox"/> No <input type="checkbox"/>
Cash Contribution <i>How much did your organisation contribute to the project/activity?</i>		Yes <input type="checkbox"/> No <input type="checkbox"/>
Value of voluntary labour <i>Please provide details about the number of volunteers, hourly rate, and number of hours that contributed to the delivery of the project</i>		Yes <input type="checkbox"/> No <input type="checkbox"/>
State Government <i>Did you receive any funds from the State Government? If no - leave blank.</i>		Yes <input type="checkbox"/> No <input type="checkbox"/>
Australian Government <i>Did you receive any funds from the Federal Government? If no - leave blank.</i>		Yes <input type="checkbox"/> No <input type="checkbox"/>
Other <i>Did you receive any other funding from anywhere else? If yes - How much?</i>		Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Total Project Income</b>	<b>\$</b>	

**Table 2: Total Project Expenses**

Provide itemised cost details to deliver the project i.e., products, services, labour both paid and voluntary, insurance, catering etc	Cost (\$)	Receipts/Supporting Evidence Attached
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Table 2 Total Project Expenditure</b>	<b>\$</b>	

Total Project Expenses in Table 2 = Total Project Income in Table 1

