

NSW Aboriginal Land Council

Regional Event Grant



New South Wales
Aboriginal Land Council

ACQUITTAL REPORT – FORM B

DETAILS OF RECIPIENT

Name of Organisation/Event :

Date of event :

Location of Event:

Contact person:

Position or title:

Address:

Town/City:

State:

Postcode:

Phone:

Mobile:

Email:

Total amount granted: \$

EVENT OUTCOMES

Approximate number of people who attended the event:

Provide an overview of the success or otherwise of the event including broader community outcomes:

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EXPENDITURE

You may choose to attach your own statement to identify how grant funds have been spent to date, or you may wish to fill in the table provided below. Please attach supporting documentation (e.g. receipts).

	Total approved project budget			Actual expenditure			Variation	
	Other sources funding	Total NSWALC grant	Whole event budget	Other sources funding	Total NSWALC grant	Whole event budget	Variation NSWALC funds	Variation event budget
EVENT COSTS								
TOTAL								

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Is there anything else you would like to raise in the report:

CONFIRMATION

I, _____, confirm that the contents of this report, and any associated attachments are true and accurate.

Signature:

Date:

Print name:

Office held: