

Shannon Community Development Trust Accountability Form



Name of Organisation/Individual

Finances

Amount of funding you received

Amount unspent (*if applicable*)

The grant was spent as follows and we/I attach evidence of expenditure (receipts, invoices or signed statements by the Organisation's Accountant

Item

\$ Amount

The grant had the following benefits for our Club/Organisation/myself

The grant had the following benefits for the Shannon community

Declaration

We/I, the undersigned, (being Officer(s)/Treasurer/Accountant of the above Club/Organisation), hereby certify that we/I received a grant from the Shannon Community Development Trust

Name and Address (of two people if a Club or Organisation)

By typing your name in the space provided below, you are 'electronically signing' this form.

Name:

Date:

Address:

Position:

Name:

Date:

Address:

Position:

Please submit your Accountability Form electronically to:

The Honorary Secretary
Shannon Community Development Trust
C/- recordsprocessing@horowhenua.govt.nz

or post to:

The Honorary Secretary
Shannon Community Development Trust
C/- Horowhenua District Council
Private Bag 4002
Levin 5540



Shannon Community
Development Trust
