

Horowhenua Rural Halls Grant

Accountability Form

Version 1: 2018/2019

Name of Society/Organisation:

Hall Address:

Date accountability due:

1. Contact Details:

Name:		
Role/position:		
Phone:	<i>Day:</i>	<i>Night:</i>
Address:		
Email:		

2. The Hall

Prior condition of the hall:	
Please describe the improvements/additions made:	
How have these improvements bettered the community?	

3. Community Collaboration

Has this project enhanced Community Collaboration? Please explain

4. Finances

Amount of funding you are received (please attach all receipts):	
Was any funding left over from this project and why? If yes, this needs to be returned to Horowhenua District Council	

5. Additional information

Please list and attach any media items about your project, or other supporting documents
Is there any further information that indicates that success of this project, and the value it has added to your community?

Signed:

Date: