Local Community Event Sponsorship Acquittal Report

Community Assistance Program



This form is to be completed by funding recipients reporting expenditure of Local Community Event Sponsorships.

P: 07 4936 8368 | E: CommunityServicesSponsorship@rrc.qld.gov.au | W: rockhamptonregion.qld.gov.au | PO Box 1860 Rockhampton QLD 4700 | ABN: 59 923 523 766

Applicant Details			
Organisation name:			
Contact name:			
Postal address:			
Preferred contact number:	Email:		
Event title:			
Event Outcome			
Describe how the event objectives were met and outcomes measured, including any feedback from participants:			
Is there anything that could have been done differently? (For example, catering, cost, venue, advertising, etc.)			
Participation			
Please detail the number of participants in the event (where possible include breakdowns of age ranges and target groups identified in your application):			



Actual Event Revenue and Expenditure			
Income		Expenditure	
Please list all event related amounts:	\$ value	Please list all event related costs:	\$ value
Council sponsorship:			
Other – please detail:			
Total Income:	\$	Total Expenditure:	\$
How will any unspent funds be used?			
Supporting Documentation			
Copies of the following must be supplied:			
 Receipts for expenditure; Evidence of Council acknowledgement (for example, print media coverage, publications, articles, speech notes, brochures etc); and 			
□ Photo/s of completed event (maximum of three).			
Declaration			
I submit this form with the relevant supporting documentation as required. I declare that the details are true and correct and that all conditions of the funding agreement have been complied with.			
Name:		Signature:	
Position in organisation:		Date:	