



5 Lawrence Street, Beaufort 3373
Phone: (03) 5349 1100
Fax: (03) 5349 2068
Email: pyrenees@pyrenees.vic.gov.au

Pyrenees Shire Council Grants Activity Report Form

Congratulations on completing your Project.

Submitting this Activity Report is a requirement of receiving a Community Grant and is an important part evaluating the Community Grants.

To acquit the Community Grant provided to your organisation you need to submit this Activity Report by **30th June in the financial year you received the funding.**

Details of how can be found at the end of this form.

Any queries about completing this form can be directed to Council's Community Wellbeing and Grants Coordinator on **03 5349 1100**

Date:	
Funded Organisation:	
Name of person completing this form:	
Grant:	<input type="checkbox"/> Community Grant <input type="checkbox"/> Community Capital Grant
Project Name:	
Grant Round:	<input type="checkbox"/> Round One, March <input type="checkbox"/> Round Two, September Year: 20__
Position:	
Telephone:	
Address:	
Email:	

PYRENEES SHIRE COUNCIL

PYRENEES
SHIRE



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1. What did you do? (Briefly describe your project, what it entailed and any changes you made from the original plan) where, when and who participated or benefited)

2. What were the outcomes of your project? (What did the project achieve, who participated, what was the final result, who will benefit or benefitted?)

3. Photographs

Please attach some photos of your project

4. Event promotion

Which of the following activities did you undertake to promote your activities or events?

Double click to check box

- | | | |
|--|------------------------------|-----------------------------|
| Media releases | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Flyers / brochures | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Interviews with local radio / newspapers | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Posters | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Direct mail to local groups | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Invitation to Ward Councillor to participate | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

Other, please specify below

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7. Declaration

TO BE SIGNED BY THE CHAIR, PRESIDENT OR CHIEF EXECUTIVE OF THE ORGANISATION.

I declare that the above mentioned grant has been spent in accordance with the purpose and conditions for which it was granted. The attached financial acquittal and project evaluation are a true and correct record of the transactions and outcomes of the project

Name:	
Position held:	
Date:	
Signature:	