

Kendall Community Op Shop



2026

Community Grants
Acquittal Form

SECTION 3 - ACQUITTAL FORM 2026

Part 1 General Information

Name of Group / Organisation:		
Postal Address		Postcode:
Contact Person 1		Position:
Phone Number (Daytime)		Email:
Project Name / Description		
Grant amount approved	\$	

Part 2 Program Project Acquittal

A. List the main objectives of the project

B. Did the program meet the aims / objectives of the project? If so, how? If not, why?
(Attach 2 photographs).

C. What obstacles, if any, did the project face and how were these overcome?

D. In what ways was the project effective / ineffective in benefiting the community?

E. Were you able to keep to your stated timeline? If not, what prevented this?

F. List any recommendations you would make for the future development of a project such as this?

G. Please make any comments that relate to your project.

H. Attach two photographs

Part 3 Financial Statement

Please provide financial details of the project

Income

Kendall Op Shop Grant:

\$	
\$	
\$	

Other

Total Income:

Expenditure

Item 1

\$	
\$	

Item 2

\$	
\$	

Item 3

\$	
\$	

Item 4

\$	
\$	

Item 5

\$	
\$	

Item 6

\$	
\$	

**Total
Expenditure:**

(add extra page if needed)

Signatories name:

Signatories name:	
Signatories position:	
Date:	
Signature:	

Please forward completed evaluation form by 1st February 2027 **or** within one month after the completion of the project to:

The Secretary
Kendall Community Op Shop
PO Box 60
Kendall NSW 2439