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Website [www.victoriaplains.wa.gov.au](http://www.victoriaplains.wa.gov.au)

**Shire of Victoria Plains**

**2017/2018 Community Budget Submissions**

**Submission Form**

**Project Summary**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Community Group Applicant | |  | | |
| Contact Name | |  | | |
| Contact Phone | |  | | |
| Contact Email | |  | | |
| Submission Title | |  | | |
| Amount Requested | | $ | |  |
| Total Project Cost | | $ | |  |
|  | |  | | |
| **OFFICE USE ONLY** | | | | |
| APPROVED | $ | | OR % up to $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

**CLOSES – 4pm Friday 31 March 2017**

|  |
| --- |
| **If you have any queries regarding this form, please contact the shire’s Community Development Officer on 08 9628 7004 or** [**cdo@victoriaplains.wa.gov.au**](mailto:cdo@victoriaplains.wa.gov.au)**. Please return the completed application and any accompanying documentation no later than:**  **4pm Friday, 31 March 2017.** |

**Contact Details**

|  |  |
| --- | --- |
| Community Group Name |  |
| Contact Person |  |
| Position Held |  |
| Postal Address |  |

**Tax & Bank Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Does your organisation have an ABN? | Yes No |  | ABN Number |  | |
| Is your organisation registered for GST? | Yes  No |  | GST Registration Date |  | |
| Bank Account Name |  | | | | |
| Bank & Branch Name |  | | | | |
| BSB |  | | | | |
| Account Number |  | | | | |
| **Eligibility Criteria**  Is your organisation Not-for-Profit?  *Please attach a copy of your Certificate of Incorporation* | | | | | Yes No |

**Project/Submission Description**

**Provide a description of your project/submission.**

|  |
| --- |
|  |

**Provide details of who will benefit from your budget submission?**

|  |
| --- |
|  |

**Are you working with any other local community groups, businesses or service providers in regard to this submission? If yes, provide details.**

|  |
| --- |
|  |

**PROPOSED BUDGET**

|  |  |
| --- | --- |
| **INCOME (inc GST)** | |
| **Details of funding sourced from other organisations (private business, sponsorship, fundraising, donations etc)** | |
| Shire Contribution Requested | $ |
| Community Group Cash Contribution | $ |
| Community Group In-Kind Contribution (volunteer labour) | $ |
| Other Funding i.e Sponsorship (please attach documentation) | $ |
|  |  |
|  |  |
|  |  |
| **TOTAL PROJECT INCOME/FUNDING** | **$** |

|  |  |
| --- | --- |
| EXPENDITURE (inc GST) | |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
| **TOTAL EXPENDITURE** | **$** |

**Authorisation**

The authorised person signing this application should be an executive member, i.e. president, vice-president, secretary or treasurer.

I, (name) certify that I hold the position of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ with (organisation) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ and am authorised to submit this submission on behalf of the organisation.

Signed: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Check list**

Please ensure you attach the following to your application:

Quotes from suppliers if applicable

Copy of your Certificate of Incorporation (if applicable)

Copy of current Statement of Financial Position.

Details of other funding i.e. sponsorship.