

## PLEASE ENSURE BOTH PAGES ARE FULLY COMPLETED

Organisation Name		
Date Approved	Grant Number	
Approved Specific Purpose (as outlined in the approval email)		
Salary / Wage Approved Amount	\$ Total Grant Approved Amount	\$

## **IMPORTANT NOTES:**

- If a salary/wage is paid via invoice you cannot use this form. An invoice and full bank statement is required.
- If there was a change in staff member during the approved timeframe, **prior written approval** must have been sought. If prior written approval was not sought, a refund of these funds will be required.
- If a funding surplus exists, the surplus must be returned to Grassroots Trust Limited by direct credit within 5 working days of becoming aware of the surplus.
- If a funded role was vacant at the time of approval, you must attach a copy of the new staff members employment agreement and position description to this form.

## **SALARY/WAGE CLAIM:**

Funded Position	Employee Name	Timeframe Funds Claimed (start and end date)	Amount Approved for Position	Grant Funding Claimed	Amount Refunded (if applicable)
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## **DECLARATION:**

We	, the undersigned declare that <mark>(please tick)</mark> :
	We have authority to submit this declaration on behalf of the Organisation.
	The information provided is true and correct in all matters reported on and is the full content and detail
	requested. It is acknowledged and agreed that Grassroots Trust Limited has the right to seek further information
	and that our Organisation agrees to fully support any such request by providing that material in a swift and full
	manner.
	We have no personal interest in the positions(s), or service(s) funded.
	Funds granted have been used for the Approved Specific Purpose only and all legal obligations including IRD
	deductions have been met.
	It is acknowledged and understood that if funds have not been spent on the specific purpose approved (and have
	not been returned), and/ or the grant conditions have not been adhered to, our Organisation commits a breach
	of section 115A of the Gambling Act 2003.
	No funds granted have been applied retrospectively (paid prior to the date approved).
	We have not received funding from another source for the same Approved Specific Purpose.
	We agree to comply with any request to audit by either Grassroots Trust Limited or the Department of Internal
	Affairs (DIA) for any information in relation to how funds have been spent. We also agree that an officer from
	the DIA may direct an audit or inspection of the books or data systems of the Organisation.
	We have read and understand the audit and accountability information on Grassroots Trust Limited's website as
	it applies to this funding: <a href="http://www.grassrootstrust.co.nz/accountability">http://www.grassrootstrust.co.nz/accountability</a> . This includes the Conditions for
	Allocation of Funds, Audit and Inspection Requirements.

Full Name of Authorised	Full Name of Authorised	
Signatory 1*	Signatory 2*	
Position	Position	
Email Address	Email Address	
Phone Number	Phone Number	
Signed (Hand Signed) Electronic signatures will not be accepted	Signed (Hand Signed) Electronic signatures will not be accepted	
Date	Date	

<sup>\*</sup>An authorised signatory is a person elected or appointed by the Grant Recipient in accordance with their Constitution to act and sign documentation on behalf of the entity. One of the signatories may be a Chief Executive Officer provided that person has no interest in the grant, e.g. by way of salary or contract services paid.