



# 2018/19 Community Grants Program

**Organisation:** .....

**Amount of grant funding approved:** .....

We hereby certify that the one-off funding approved under the City of Victor Harbor Community Grants Program 2018/19 has been expended for the approved purposes as specified:

<b>Details</b>	<b>Expenditure</b>
.....	\$.....
.....	\$.....
.....	\$.....
.....	\$.....
<b>Total</b>	<b>\$.....</b>

**Organisation representatives:**

Name.....

Name.....

Signature.....

Signature .....

Position Held.....

Position Held.....

Date.....

Date.....

Please return this form when all funds have been expended to:

City of Victor Harbor  
 (Attention: Community Grants Program)  
 PO Box 11  
 VICTOR HARBOR SA 5211  
 or email to [localgov@victor.sa.gov.au](mailto:localgov@victor.sa.gov.au)



city of  
Victor Harbor

