

OFFICE USE ONLY		
DATE RECEIVED:-		

To be completed **3 months** after receiving the TTCF grant. If the funds have not been fully expended after 3 months, please complete the report as an 'Interim Accountability Report.' You will be required to submit another report every 3 months until the grant has been fully expended. Please note: Failure to complete a satisfactory accountability report and to provide the required supporting documentation will impede upon future applications.

**PART ONE: ORGANISATION DETAILS** 

1. Full name of organisation
The organisation's name should generally be the same as the bank account name
2 Date of accountability report
2. Date of accountability report
3. Name of Contact Person for this Accountability Report
PART TWO: APPROVAL DETAILS
These can be found on the organisation's 'Approval Letter'
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4. Grant Number & Amount of Grant
Grant No:
5. Date paid into bank account
This will be the same as the date on your organisation's 'Approval Letter'
This will be the same as the date on your organisation's hippiroval zetter
6. Purpose for which funds were granted:
7. Type of accountability report:
Is the Accountability Report: Interim $\square$ Final $\square$ Please tick

Yes □ No □ <i>Please tick</i>
If 'No' a refund of the remaining amount to TTCF is required.
Please pay by direct credit to TTCF Ltd's BNZ account: 02-0922-0041300-00, with your Grant Number as the reference.

## **PART THREE: EXPENDITURE DETAILS**

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TOTAL SPENT  10. What were the key outcome	\$ \$ \$ ses for your organisation as a result of this TTCF grant?	
	\$ <b>\$</b>	

## PART FOUR: SUPPORTING DOCUMENTATION

The following documentation is required to support this Accountability Report: (Please tick the boxes to indicate the information is attached)

For all	TTCF Grants
	Copy of bank statement showing the TTCF Grant deposit into your organisation's bank account
For TT	CF grants where purchases have been made
	Copy of invoice(s) to support the expenditure of the grant
	Copy of the bank statement(s) showing the payment of the invoice(s)
	If the payments have been made in batch form, a copy of the batch schedules
For TT	CF grants which have been spent on salary/wages
	Copy of the payroll verification indicating gross salary, PAYE and name of employee(s)
	If the payments have been made in batch form, a copy of the batch schedules
	Copy of the bank statement(s) showing the payment(s) made from the organisation's bank account.

## Send your completed Accountability Report & Supporting Documentation to TTCF:

By NZ Post	TTCF, Private Bag 93108, Henderson, Auckland 0650
By Courier	TTCF, Level 3 Lincoln Manor, 295 Lincoln Road, Henderson, Auckland 0610
By Email	grants@ttcfltd.org.nz

## **PART FIVE: DECLARATION**

DECLARATION	
Please note: this form needs to be completed	by two authorised signatories from the organisation -
then scanned to TTCF.	
Grant No:	

We solemnly declare that all details contained in this report are true and correct to the best of our knowledge, and that we have the authority to provide this information.

Signature of First Authorised Signatory	
Full name in CAPITAL LETTERS	
Role (eg CEO/Principal/Chairperson)	
Date	
Signature of Second Authorised Signatory	
Full name in CAPITAL LETTERS	
Role (eg Secretary/Treasurer/Trustee)	
Date	