

## Longreach Regional Council COVID-19 Relief Program

## Acquittal form

Contact number:  Email:  DVERVIEW  Please provide a brief description of how the Longreach Regional Council COVID-19 Relief Grant supported your organisation.  PROJECT ACQUITTAL  Income:  S  Council Sponsorship  Unexpended Funds returned to Council: \$  SUPPORTING DOCUMENTATION  Copies of the following must be supplied:	APPLICANT DETAILS				
PROJECT ACQUITTAL  Income:  Council Sponsorship  Junexpended Funds returned to Council: \$  SUPPORTING DOCUMENTATION  Copies of the following must be supplied:  Evidence of Council COVID-19 Relief Program expenditure  DECLARATION  declare that the information provided in this form is true and correct and that all the conditions of the funding agreement have been met.  Name:	Name:				
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Name:					
signature:					
Destate of the communications					
	Position in organisation:				