

Auspice Declaration Form

Auspice Organisation Name: _____

Auspice Address: _____

Auspice Phone: _____

Auspice email: _____

Auspice ABN: _____

Auspice Legal Status: Incorporated Limited by Guarantee Church Other

On behalf of the Auspice Organisation I declare that:

The information about the Auspice Organisation is true and correct;

That the Auspice Organisation is aware of and supports the proposed project and this application for funding;

I understand that if this application is successful the Auspice Organisation will be responsible for:

- Dispersing the CDF grant as agreed with the submitting organisation
- Ensuring the CDF grant is utilised in the manner outlined within the funding agreement
- Ensuring a project outcome report is provided by the submitting organisation.

Auspice Representative Name: _____

Auspice Representative Position: _____

Auspice Representative Signature: _____

Date: _____