

Australian Lions Foundation

ABN 41 413 803 073



ALF OFFICE USE ONLY

Grant Number
Date Received
Action Taken

Application - Disaster Recovery Grant

Forward to Chairman - Australian Lions Foundation

APPLICANT: _____ DISTRICT: _____
 (Club/District)

ADDRESS: _____
 _____ STATE: _____ POST CODE: _____

1. PURPOSE OF APPLICATION: _____

(ENCLOSE DETAILED INFORMATION EXPLAINING AND SUPPORTING THE PROJECT)

2. APPROXIMATE NUMBER OF PEOPLE THIS PROJECT WILL ASSIST: _____

3. TOTAL COST OF PROJECT: \$ _____

4. AMOUNT OF FUNDING CLUB / DISTRICT IS PROVIDING: \$ _____

5. AMOUNT OF FUNDING REQUESTED FROM THE AUSTRALIAN LIONS FOUNDATION: \$ _____

6. **FINAL REPORTING:** THE CLUB / DISTRICT MUST COMPLETE & LODGE AN ACCOUNTABILITY FORM (PROVIDED TO YOU WHEN GRANT IS APPROVED)

DECLARATION BY OFFICERS OF APPLICANT CLUB/DISTRICT

We declare that we are authorised by the Club to take responsibility for the above Club project and accept the conditions of the grant and will on behalf of the Club, within six (6) weeks of the completion of the project, forward to the Chairman of the Australian Lions Foundation the accountability form.

Dated: _____

President/Secretary: _____
 (Name) (Signature) (Title – President/Secretary)

Project Chairman's: *Phone Number(s):* _____ *Email:* _____

Bank Account Details for Grant Internet Direct Payment

Name of Account	Bank	BSB	Account Number