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**STANDARD FUNDING REPORT FORM**

**ClubGRANTS reporting requirements**

A legislative requirement to be fulfilled by all organisations receiving ClubGRANTS assistance from registered clubs is that a club must request funding recipients to provide a report on how the funds were applied and whether the use of funds has varied from the purpose stated in the original application. If a report is not received from a funding recipient, the ClubGRANTS Guidelines require that the club should not consider any additional funding for that organisation, except in exceptional circumstances.

Funding recipients should use this form for amounts above $500. (For amounts under $500, recipients should simply return a receipt or letter of acknowledgement, as per the Guidelines.) Where an individual ClubGRANTS expenditure is above $5,000, the benefiting organisation must also complete a statutory declaration (page 3).

This report form should be forwarded to the appropriate club (and Local Committee, if the funding was allocated through a Committee) at the completion of the program, project or service. Please note: additional details should be attached to the form where the space provided is insufficient.

In some instances, a program, project or service has not been completed before the funding recipient wishes to seek further funding for another activity. In these cases, recipients should provide a progress report on the current project. This should include a timeline for the project’s completion and reasons for any delay in the expenditure of the funds.

Further information concerning the ClubGRANTS scheme is available from individual clubs, local committees, or the ClubsNSW website [www.clubsnsw.com.au](http://www.clubsnsw.com.au) or contact ClubsNSW on (02) 9268 3000 or enquiries[@clubsnsw.com.au](mailto:cdse@clubsnsw.com.au).

**INFORMATION ON RECIPIENT/ORGANISATION**

Name of recipient/

organisation: AUTISM COMMUNITY NETWORK

Postal Address: PO Box 188 Riverwood NSW 2210

Street Address: 273 Fowler Rd Illawong NSW 2234

Contact person: Warren Thompson

Position: President

Telephone: 02 9543 9036

Facsimile: N/A

ClubGRANTS Standard Funding Report Form

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| --- | --- |
|  | **Please circle appropriate response** |
| 1. Did you complete the ‘ClubGRANTS Standard Application Form – Category 1 Funding’? If so, a copy of the form must be attached to this report. ***(please attach the 5 page application form only with no supporting material)*** | YES |
| 2. Did your organisation deviate from the original areas of expenditure you nominated on the application form? | YES |
| 3. Was the organisation’s expenditure on community development and support outside New South Wales? | NO |

**If YES to question 2 or 3, please describe below how the money was applied. In relation to question 3, if the funding was of a cross-border nature, please provide details of the service to NSW residents.**

The original application sought funding support for an autism support group for carers living or working in the city of Sydney area. Unfortunately there was not enough interest in the group to sustain it, and we struggled to find a suitable facilitator.  
Our President consulted the GM of Bowlers Club of NSW Mr Rocky Massaria who approved our alternate proposal that we offer the families of children on the autism spectrum the opportunity to participate in a regular social activity.

As a result, we have been providing this social support group twice a month, with to date excursions such as:

Ferry trips for lunch at Manly, Kirribilli, and other spots, day out at Darling Harbour, and visits to Powerhouse and Australian museums, among other events.

**4. How did this support make a difference to your organisation? Please provide as much detail as possible and note anything your organisation may do differently in future years.**

We learnt that a support group wasn’t what ‘the city’ wanted, but the alternative support we have been providing through the social group has been a success.

Families who have typically struggled to get the children out of the house due to their anxieties and other autism issues, are now looking forward to going to different places and meeting other kids who won’t judge them. The carers themselves are feeling less isolated as they also enjoy the chance to meet others who understand them.

As our mission is to help parents, carers and individuals dealing with the effects of autism disorders, we are always seeking a variety of suitable social options. Whereas something like a Youth club or an Art group provide the same constants each session,, this program allows kids to get used to experiencing different things and different locations (something commonly a struggle to accept) but under a structure they feel safe within. They look forward to learning where they will go next, but as they know they will be part of the group, surrounded by many familiar faces and which is running for a fixed time it is easier to accept.

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**Please attach any additional information you consider will assist the club in making an assessment of the success of the program, project or service.**

We asked the facilitator of the group, a mum with children on the spectrum herself, why she was so supportive about this group. Her response showed us exactly why we need programs like this. She told us that some of the kids that come along have never attended a social group before. They would ask her each time where the next trip will be to. She is seeing friendship forming among children who don’t have any friends.

While our other groups are in controlled environments, this type of support allows them to mix with the wider community.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Statutory Declaration

OATHS ACT 1900, NSW, EIGHTH SCHEDULE

I, , do solemnly and sincerely declare that:

*[name of declarant]*

*The information contained in the attached Standard Funding Report Form is true and correct, and that the funds provided by the club were applied in full to the program, project or service detailed therein.*

and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the *Oaths Act 1900*.

Declared at: on

*[place] [date]*

*[signature of declarant]*

in the presence of an authorised witness, who states:

I, , a ,

*[name of authorised witness] [qualification of authorised witness]*

certify the following matters concerning the making of this statutory declaration by the person who made it: *[\* please cross out any text that does not apply]*

1. \*I saw the face of the person *OR*  \*I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and
2. \*I have known the person for at least 12 months *OR* \*I have not known the person for at least 12 months, but I have confirmed the person’s identity using an identification

document and the document I relied on was

[*describe identification document relied on]*

*[signature of authorised witness] [date]*