

# Regional Arts Development Fund (RADF) Grant Outcome Report



Queensland  
Government



The RADF Program requires all grant recipients to complete an Outcome Report no later than 8 weeks after the project has ended. It is a condition of receiving a RADF grant and a formal stage of the funding cycle. It is the way you account for how you have used public money. Read through the Outcome Report before you start your funded project to ensure that you're familiar with the kind of information required when you complete the report.

The information in your Outcome Report also helps Arts Queensland and the Council to understand the nature of the arts and cultural industry and identify future investment opportunities to support arts industry development and professional artists. Make sure that the information you supply in the Outcome Report is accurate, and please answer every question which relates to your funded activity.

**Refer to your original application:** It is your responsibility to ensure that all information and amounts recorded in the Outcome Report and other related documents are accurate and can be accounted for. It is recommended that you refer to your copy of the original application you sent to Council in order to fill out your Outcome Report.

**Record-keeping of official documents:** All receipts relating to the spending of RADF money must be attached to this Outcome Report.

**Unspent RADF money:** Any RADF money not spent on the approved items in the funded project must be reflected in the Financial Summary items 11, 12 of this Outcome Report. Unspent money is returned to the Council with this report.

**Help is available:** If you have any questions on how to complete this Outcome Report, contact your Council RADF Liaison Officer for assistance.

## 1. APPLICANT DETAILS

Grant Recipient:

Postal Address:

Contact Person's Name:

Telephone (Business Hours):

Email:

## 2. GRANT RECIPIENT'S DECLARATION

I certify to the best of my knowledge and information the details provided in this outcome report and associated documentation are true and correct.

Name:

Signature:

Date (DD/MM/YY):

### OFFICE USE ONLY

Further action required?

No

Yes specify:

Officer:

Signature:

Date (DD/MM/YY):



### 3. PROJECT OUTCOME REPORT

<b>Project Start Date:</b>	<b>Project Completion Date:</b>
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**Total Project Cost: \$**

#### How many people benefited / participated in the project

<b>Number of Volunteers:</b>	<b>Number of paid workers:</b>
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**Number of other participants (audiences, attendees etc):**

<b>Were any changes made to the project from the initial application?</b>	<b>Yes</b>	<b>No</b>
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**If yes, were the changes made approved by the RADF Committee?**

**Yes** – I have attached all documents relating to the changes made to the project and a copy of the letter approving these changes from the RADF Liaison Officer/RADF Committee to this Outcome Report.

**No** – Please advise the RADF Liaison Officer of any changes. Failure to do so may affect your future applications to the program and/or require you to return funds spent on unapproved project activities.

**Describe the main activities undertaken in this project.**



**Describe how the project achieved the results outlined in the original application including any unexpected results.**

**Identify any community groups who were involved in the project.**

Aboriginal people

Torres strait islanders

Australian South Sea Islanders

Children and Young people (30 years and under)

Older people (55 years and over)

People with a disability

Women

People from Culturally and linguistically diverse backgrounds

**What did people think of the project/s? Include any written feedback or quotes from participants.**



**Outline any media coverage of your project/s.**

**How did this project benefit you, your community or fellow artists or cultural workers?**



**4. PROJECT INCOME & EXPENDITURE STATEMENT – GST inclusive**

<b>EXPENDITURE</b>	<b>Total Cost</b>	<b>RADF</b>	<b>Income</b>	<b>Total</b>
List the total cost of each item <ul style="list-style-type: none"> <li>• Please provide copies of receipts.</li> <li>• Volunteer hours are costed at \$20.00 per hour</li> </ul>	(of Each Expenditure item)		(Income includes in kind contributions and the total RADF grant you are seeking)	(of each income item)
Salaries, Fees and Allowances			Earned Income	
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$
Production/Program Costs			Contribution from Artists and Others (Please note if this is in-kind)	
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$
Promotion, Documentation and Marketing			Other Grants	
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$
Administration			Sponsorship, fundraising and donations (Please note where this is in-Kind)	
	\$	N/A		\$
	\$	N/A		\$
	\$	N/A		\$
RADF GRANT (total from column 3)			RADF GRANT (total from Column 3)	
<b>TOTAL EXPENDITURE</b>	\$		<b>TOTAL INCOME</b>	\$

If you are able to provide a more detailed budget report, please attach to this acquittal.



List all receipts that relate to the spending of your RADF Grant

Receipt	Amount
	Attached
	Attached
	Attached
	Attached
	Attached
	Attached
	Attached
	Attached
	Attached
	Attached

Did you fully expend your grant?

*Please note that any unexpended funds of \$100 or more must be returned to Council.*

Yes

No – Amount refunded to Council: \$

**To be signed by your organisation’s Treasurer (or appropriately delegated office bearer) or independent auditor.**

- I certify that to the best of my knowledge, information detailed in this report (and relevant attachments) is true and correct.
- I understand I may be asked to provide the Council with additional information on the funded project.
- I understand that the Council and RADF Committee may nominate my project to Arts Queensland as an example of best practice.

**Name:**

**Position:**

**Signature:**

Date (DD/MM/YY):

**Declaration by Auspice Body (As identified in RADF Application) If Applicable**

- I certify that to the best of my knowledge, information detailed in this report (and relevant attachments) is true and correct.
- I understand I may be asked to provide the Council with additional information on the funded project.

**Name:**

**Position:**

**Signature:**

Date (DD/MM/YY):



## Checklist

### Have you included:

- Copies of receipts
- Detailed Profit & Loss Statement (if required)
- Copies of marketing and promotional materials
- Clear, high resolution digital images of your project

## Council Contact Details (Please Contact the RADF Liaison Officer for any assistance)

### RADF Liaison Officer

**Phone:** 1300 007 662

**Email:** [council@maranoa.qld.gov.au](mailto:council@maranoa.qld.gov.au)

### Council postal address:

Maranoa Regional Council  
PO Box 620  
Roma QLD 4455