**Wandsworth Grant Fund: Project Outcome Report**

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| **Name of organisation:** | | | |  | | | | | | |
| **Grant reference number (as per grant agreement letter):** | | | |  | | | | | | |
| **Name of project:** | | | |  | | | | | | |
| **Date of start/completion:** | | | |  | | | | | | |
| **Total Grant award:** | | | | £ | | | | | | |
| |  | | --- | | **Please provide a summary of your project** (Copy this from the project summary in your application form) | |  | | | | | | | | | | | |
| 1. **Detail of TOTAL expenditure of the project:** (Proof of expenditure may be asked for at a later date) | | | | | | | | | | |
| Expenditure details | | | | | **A** Actual total cost of item/activity | | | | **B** Value of WGF grant spent on item/activity | **C** Value of Match funding /In-kind donations spent |
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| Total amount spent (A=B+C) | | | | |  | | | |  |  |
| 1. **With reference to your grant agreement please tell us about the following:** | | | | | | | | | | |
| **2.1 How many people directly benefited from the grant?** | | | | | | | | | | |
| 1. Total number of people | | 1. Number of which were Wandsworth residents | | | | | iii) Number of paid staff /volunteers involved in delivering the project  Paid staff: Volunteers: | | | |
| **2.2 Achieving your planned Outcomes (copy from your application)** | | | | | | | | | | |
| Planned Outcome | | | Data used to gather information | | | | | Achievements for participants | | |
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| **2.3 Please describe reasons for any changes you made to your plans and what lessons have been learnt from undertaking the project.** | | | | | | | | | | |
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| **2.4 Please tell us about any longer term impact of the project. If you plan to sustain the work following this grant, how do you plan to achieve this?** | | | | | | | | | | |
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| 1. **Declaration:**   You must be an authorised signatory of the organisation.  I confirm that this report is an accurate record of activities undertaken and financial information. We will keep all receipts for items purchased/services paid for, for at least two years. We are aware that we may be asked to forward receipts for inspection or that we may be visited by you to inspect our records during this period. | | | | | | | | | | |
| Name (CAPITALS): | | | | | | | | | | |
| Position or Job Title in relation to the activity: |  | | | | Signature: |  | | | | |
|  |  | | | | Date: |  | | | | |

Please email your **Outcome Report Form** to: [wgf@wandsworth.gov.uk](mailto:wgf@wandsworth.gov.uk)

**Your Project Report should be submitted no more than 60 days after the completion of your project. Please contact the Grants Team if you have any delays.**