# Financial Acquittal Report

Strengthening Medicare – General Practice Grants Program

*Thank you for participating in the Strengthening Medicare - General Practice Grants Program.*

*As indicated in the funding agreement the grantee is required to submit a financial acquittal report to inform how the grant has been used and that the funding has been spent in accordance with the grant agreement.*

*NOTE: Please return this form to your local PHN as soon as funds have been spent or before   
30 June 2024.*

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| **Grant Details** | |
| **Full legal name of Grantee (Practice name):** |  |
| **Agreement ID Number:** |  |
| **Address of General Practice:** |  |
| **Reporting Period:** | [Agreement execution date] to 30 June 2024 |

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| --- | --- |
| **Grant Funding**  **(excluding GST)** | |
| Grant funding received in 2022/23 | $ |
| Grant funding received in 2023/24 | $ |
|  | |
| **Grant funding spent on each investment stream** | |
| Enhance digital health capability | $ |
| Upgrade infection prevention and control arrangements | $ |
| Maintain accreditation against RACGP Standards for General Practices | $ |
| Achieve accreditation against RACGP Standards for General Practices | $ |
|  | |
| **Total grant funding spent in accordance with the grant agreement** | **$** |
| Grant funding which remains unspent and uncommitted from financial year 2022/23 | $ |
| Grant funding which remains unspent and uncommitted from financial year 2023/24 | $ |
| ***NOTE*** – If unspent funds are recorded, please ensure details are provided below. | |

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| **Reason for Unspent Funds (if applicable)** |

Please provide the reason/s for the unspent funds:

**Insufficient time to spend grant**

**Expenses less than anticipated**

**Requirements of the practice changed**

**☐   Other reasons [please state reason]**

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**Financial Declaration**

This declaration must be certified on behalf of the grant recipient by one of the following:

* Your organisation's Board;
* Chief Executive Officer;
* Chief Financial Officer or
* an officer with authority to do so.

We declare that the Financial Acquittal Report:

1. gives a complete and accurate view of the income and expenditure for this Grant; and
2. all funding was expended for the project and in accordance with the Grant Agreement.

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| Name of the person making the Declaration |  |
| Signature of person making the Declaration |  |
| Position in Organisation |  |
| Date of Declaration |  |