

ACCOUNTABILITY REPORT

Please complete this form within 3 months of the date you received your donation. Return it to:
Air Rescue Services, Donation Processing, P.O.Box 20326, Bishopdale, Christchurch 8543 OR info@arcs.co.nz

Date:

File Reference Number:
 (can be found on your approval letter)

Name of Organisation:

Donation amount approved by Air Rescue Services: \$

GOODS/SERVICES PURCHASED :

Organisations who are registered for GST must show the figures below as GST exclusive. Organisations who are not registered for GST, must show the figures below as GST inclusive.

The money donated by Air Rescue was spent as follows : (use separate sheet if necessary)

Invoice Attached	Name of payee	What was purchased	Total cost
<input type="checkbox"/>			\$
<input type="checkbox"/>			\$
<input type="checkbox"/>			\$
<input type="checkbox"/>			\$
<input type="checkbox"/>			\$
<input type="checkbox"/>			\$
Total Spent			\$
Donation amount approved			\$
Amount left over (if any) Show NIL if donation fully spent			\$

Please attach copies of each invoice listed and tick the appropriate boxes

PLEASE NOTE: For amounts left over, you are required to forward a refund. Once your paperwork has been checked we will forward our bank details for an electronic transfer.

BANK RECORDS :

Please enclose copies of your organisations **BANK STATEMENTS** highlighting the deposit of the donation you received, **AND** the corresponding expenditure (withdrawals) that were made. The Withdrawals should match with the copies of the invoices you have attached. **IF NOT, YOU WILL NEED TO EXPLAIN WHY.**

Person completing this form: Phone Number:

Signature:

I confirm the information provided is true and correct to the best of my knowledge.