

## GLEN INNES SEVERN COUNCIL COMMUNITY DONATION REPORT

This report must be completed and submitted to Council by 30 June 2025.

Name of organisation:	
Address:	
Email Address:	
Contact Name:	
Contact Phone:	
President:	
Secretary:	
Treasurer:	
Amount Received from Council:	\$
Details of how funds were expended:	
What services or activities were provided to Glen Innes Severn Residents?	
Signature:(Chairperson or equ	Date:
(Chairperson or equ	iivaient)

Please return to:

By Post: The General Manager

Glen Innes Severn Council

PO Box 61

**GLEN INNES NSW 2370** 

By Fax: (02) 67 323 764

By Email: <a href="mailto:council@gisc.nsw.gov.au">council@gisc.nsw.gov.au</a>

By Hand: 265 Grey Street, GLEN INNES.

## **Privacy Statement**

Glen Innes Severn Council is committed to protecting your privacy. The personal information you provide in this form is for the purposes directly related to the functions of Council, specifically relating to this form. The information you provide will not be used or disclosed for other purposes unless you provide further consent or as authorised by law. This information is collected under the Privacy and Personal Information Protection Act 1998 (the Act) and if you require further information, please see our Privacy Management Plan at <a href="www.gisc.nsw.gov.au">www.gisc.nsw.gov.au</a> or contact Council on (02) 6730 2300.