

LEP - Acquittal Claim Form - FY24/25

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* indicates a required field

Important Information & Instructions

As per the conditions of your NSW Landcare Enabling Program 2023-2027: Local and Regional Coordinators (LEP) Funding Deed, it is a requirement that you provide annual updates on the delivery of your project.

In addition to completing this form, Local Land Services (LLS) may meet with your organisation quarterly, at their discretion, to discuss the Program and role/s.

As per your LEP Funding Deed, you must deliver the agreed amount of Full Time Equivalent (FTE) roles for a period of four years, ending 30 June 2027. You should refer to the approved FTEs in your Funding Deed for the number of roles you have committed to deliver.

Please ensure you are keeping accurate and correct records to support any claims for payment, as in the event of an audit you will be required to produce these.

NOTE: This report is for the FY 24/25 period only

When you have completed this form, click **Review and Submit**. If there are any unanswered mandatory questions, these will be highlighted in red, and you will need to fill them out. When complete, click **Review and Submit** again.

For assistance filling in the form or if you have any questions regarding your project, please email gmo@dpird.nsw.gov.au - quoting your application ID in the subject header.

PLEASE NOTE: Once this form has been submitted and your claim has been reviewed and approved by GMO and LLS, you will be contacted to provide an invoice for payment of your next instalment.

Project Contact information

Project contact details can change during delivery, please provide the current project and financial contact details below for your project.

Project contact name *

Project contacts position *

Project contacts phone number *

Must be an Australian phone number.

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Project contacts email *

Must be an email address.

Funding Information

Amount received in grant funding for the 24/25FY *

Must be a dollar amount.

This is the amount your organisation invoiced GMO for in your last claim.

Please upload a copy of your approved Funding Deed/ Approved Deed of Variation *

Attach a file:

This outlines what the grant funding must have been used for the FY. Please refer to the budget table

Employment expenditure

* indicates a required field

Employment reporting information

Please input employment expenditure for approved FTE roles employed for the FY24/25 **reporting period (01/07/24 - 30/6/25)** to release your next instalment claim.

Where there is a shortfall reported in the financial year, you will be **required to make an adjustment to the following years payment allocation (claim invoice) to reflect this shortfall.**

IMPORTANT INFORMATION:

Expenditure cannot exceed your approved Budget within your executed Deed.

Roles reporting:

- FY24/25 reporting period is from 01.07.24 - 30.06.25 ONLY
- For the purpose of the Program, an FTE equates to a 35-hour week (Monday to Friday).
- Examples of roles and how to record:
 - 17.5 hours work would be counted as 0.5 FTE (1 FTE = 35 hours)
 - 2 employees each completing 17.5 hours per week would be considered 1 FTE (Combined hours of 35 per week).
- Figures being reported should NOT EXCEED those listed in your Funding Deed
- Minimum program requirement per role is 0.5 FTE (unless approval otherwise obtained from LLS)

Please ensure you maintain a full set of accounting records for each financial year in case you are contacted to provide any of the below evidentiary requirements.

Evidence of wages expenditure may be requested for reporting and auditing purposes, so you should ensure you have accurate record keeping and information available if

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required. Examples of evidence that MAY be required could include the following, but are not limited to:

- **Statutory Declaration** completed by an authorised officer of the organisation confirming the FTEs, actual expenditure incurred to date and the period in which it was incurred. Statutory Declarations must be witnessed correctly to be compliant.
- **Payroll Reports:** these reports should include Role ID Numbers, not FTE names. Payroll Reports including personal/sensitive information e.g., FTE name will not be accepted. Payroll reports should include appropriate leave accrual entitlements.
- **Ledgers or Transaction listings** must be signed by authorised officers of the organisation and expenditure information such as (but not limited to) invoice numbers or internal cost centres, dates, amounts, descriptions and proof of payment details.
- **Invoice and Proof of payment** showing expenditure has been incurred in accordance with the Deed.

Employment Expenditure

Reporting of Employment is by role type NOT employee.

Figures listed below should only apply to the 24/25 Financial period (1 July 2024 - 30 June 2025).

All figures reported are Gross not Net.

- **Employment Hours** - Actual total hours by role worked and paid to employees (includes public holidays and any annual leave entitlements).
- **FTE Calculation** - This will automatically fill from information provided in form. Calculation: Employment hours + Leave hours will provide number of FTE by role.
- $1 \times \text{FTE} = 1820 \text{ hrs per year}$
- **Amount of Gross Base Salary** - Please refer to your approved budget for Base Rates. Figures provided here should reflect Base rate x FTE for role/s being reported. Amounts cannot exceed approved budget amounts.
- **Amount of On Costs being claimed** - Please refer to your approved budget. Must not exceed 23.5% of the Base Salary.
- **Employment Expenditure Totals for each Role for 24/25FY** = Gross Base Salary + On Costs

Role Type	EMPLOYMENT HOURS - actual total number of hours worked and paid for each ROLE type for FY24/25 (includes public holidays and Annual Leave entitlements)	FTE CALCULATION - total number of FTE roles being reported	AMOUNT OF GROSS BASE SALARY - base salary for the ROLE being claimed for the 24/25FY	ON COSTS - amount of salary ONCOSTS being claimed for the role for 24/25FY	EMPLOYMENT EXPENDITURE TOTALS - total amount being claimed for each role type for the 24/25FY
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E.g. LLC, RLC or RASO - As approved in your Funding Deed	This is by ROLE type. Must be for actual hours worked + public holidays in FY24/25 Must be a number.	1 FTE is equal to a 35 hour working week, over a 52 week period. This will be calculated by the paid employment hours + paid leave hours. This number/ amount is calculated.	This is the GROSS BASE Salary costs per Role combined	Such as Superannuation, workers comp. - Must not exceed 23.5% of BASE salary Must be a dollar amount.	This includes Salary and Oncosts This number/ amount is calculated.
E.g - RLC					

Employment Expenditure Totals being claimed (Base salary + Oncosts)

This number/amount is calculated.

I/We declare that the above Employment costs being claimed directly relate to the FTEs approved in the Funding Deed for this financial period. If required financial evidence can be provided to substantiate the above costs *

- ☐ Yes
☐ No

Operational & Administration Costs

* indicates a required field

Operational & Administration costs to a maximum of 17.5% as per your approved budget.

NOTE: Expenditure cannot exceed your approved Budget within your executed Deed.

Costs can include, but are not limited to:

- Phone and internet usage
- Travel expenses
- Office accommodation
- Bookkeeping and audit
- Insurance
- Human resources e.g. Using a recruitment agency to employ roles in the Funding Deed.

These costs must directly relate to the FTE roles under the Funding Deed for the period of the claim.

Evidence of Operational & Administration Cost Expenditure

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- Please record ALL expenditure that is relevant to your FTE reporting for this financial year.
- **These costs must directly relate to the approved role FTEs listed within your Funding Deed.**
- **Costs listed below should be excluding GST.**
- **Expenditure cannot exceed your approved Budget within your executed Deed.**
- Please ensure that expenditure items listed are per line and that adequate financial evidence can be provided if requested
- If you have disbursed funds to third parties - Please provide evidence that you have paid these funds for operational costs - I.e. in the form of a ledger or proof of funds disbursement through a bank account.

Expenditure item description	Expenditure amount - Excl. GST
E.g. - Telephone Expense	
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

Total FY24/25 Operational Costs (Excluding GST)

\$

This number/amount is calculated.

Please provide evidence of operational costs - Such as bank statements/ ledger showing disbursements/ transfer to the subgroups/ downstream recipients

Attach a file:

I/We declare that Operational & Administration costs being claimed directly relate to the FTEs approved in the Funding Deed for this financial period. If required financial evidence can be provided to substantiate the above costs *

☐ Yes

I/We declare that our Organisation is maintaining and can provide a fixed asset register for all fixed asset items if requested *

☐ Yes

☐ No

Professional Development

* indicates a required field

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Professional Development Costs

Professional Development allowance was paid upon execution of your Funding Deed and can be spent over the lifespan of the funded project (4 years). These claims are capped at \$5,000 per Role ID/FTE for Local Landcare Coordinator and Regional Landcare Coordinators only.

Professional Development activities must be from one of the approved LLS categories (see below).

Any activities outside of the approved LLS categories require prior approval by LLS, evidence of this will be required.

Cost can only be claimed from the Applicant - costs cannot be claimed by individuals or personal credit cards.

Did your Organisation spend any Professional Development funding during the FY24/25 on the following roles? *

- ☐ Yes - Regional Landcare Coordinator (RLC)
- ☐ Yes - Local Landcare Coordinator (LLC)
- ☐ No

Professional Development Reporting

Professional Development must be approved Activities by LLS. **Only Professional Development for RLC and LLC roles can be claimed.**

Expenditure cannot exceed those listed in your approved Budget within your executed Deed.

Activities undertaken must be able to demonstrate how the course provided benefit to the role.

Activity category definitions:

- **Conferences and Subscriptions** - Where they directly relate to the role e.g. attendance at State gatherings or Landcare Conferences
- **Technical training/courses** - Required to undertake the role eg: First Aid, 4WD training, Computer skills, Grant & Governance training
- **Community Engagement and Well-being training** - E.g.: RuralBiz, Art of Hosting, Mental Health First-Aid, role specific professional coaching
- **Leadership training** - E.g.: leading teams and community groups
- **Academia training** - That directly relates to the role
- **Best Practice Management** in natural resource management, agriculture or sustainability
- **Social media**, website training and/or media training

Role ID that attended the Activity this financial period	Name of Professional Development Activity	Activity Category	Expenditure amount (Excl GST)	Upload evidence of Professional Development attended
ID specific to the Role claiming Professional			Must be a dollar amount.	E.g. Invoices, certificates of completion

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Development (ie, RLC#1)				

Total 24/25 Professional Development Expenditure (Excluding GST)

This number/amount is calculated.

I/We declare that the Professional Development costs being claimed directly relate to the FTEs approved in the Funding Deed for this financial period. If required financial evidence can be provided to substantiate the above costs *

☐ Yes

For projects where "Other" was selected for the Activity Category above - you will be required to upload approval from LLS prior to the course being undertaken.

Where evidence of prior approval is not provided, costs may not be eligible to be claimed.

Upload approval from LLS where 'Other' was selected in the above Activity Categories

Attach a file:

Declaration

* indicates a required field

Declaration

I declare that I am an authorised officer for the organisation.

I certify that the information submitted in this form is true and complete and that it reflects the status of the project accurately.

As an authorised officer of the organisation, I certify that the expenditure of the grant received to date has been used solely on the agreed scope of works for the project outlined in the executed Funding Deed.

As an authorised officer of the organisation, I certify that there is no matter or circumstance of which I am aware, that would constitute a breach by the organisation of any terms or conditions of the Funding Deed between our organisation and the Local Land Services or the Department of Primary Industries and Regional Development.

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As the authorised officer of the organisation listed on the executed Funding Deed, I declare that if required, I can provide all supporting evidence and documentation to support this claim.

I am an authorised delegate to complete and submit this form on behalf of the organisation and confirm agreeance with the above declarations. *

☐ Yes

Name of authorised Person submitting this form *

Must be an Authorised Officer

Position in Organisation *

Contact Email *

Must be an email address.

Contact Phone Number *

Must be an Australian phone number.