

Grant Agreement

From

The Chessed Foundation Pty Ltd ACN 615 606 052 as trustee for The Chessed Foundation (**Foundation**)

To

Name of recipient _____ ABN _____ *insert (you)*

The Foundation was established with the mission to support the Jewish community in Victoria with three principal goals:

- to help primary, secondary and tertiary students by supporting Jewish religious education and learning activities which are in accordance with the *Shulchan Aruch* (Code of Jewish Law);
- to help Jewish people in need via suitable welfare organisations; and
- to assist in fulfilling religious needs and traditions, which are in accordance with the *Shulchan Aruch*.

The Foundation is committed to supporting and enriching the lives of people in the Victorian Jewish community.

The Foundation offers to make you a grant of \$ _____ (Grant) for _____ subject to the following conditions:

1. **Use of the grant:** You must use the Grant exclusively for the **Project/Purposes** being the project/purposes set out in its grant application number (Ref ID # _____) and attached to this agreement. Please let us know promptly if anything happens which affects your ability to use the Grant for the Project/Purposes.
2. **Timeframe:** You must use the Grant in the timeframe set out in application; Please let us know promptly if anything happens which may affect your ability to use the Grant within this timeframe.
3. **Payment:** The Foundation will, subject to this agreement, pay the Grant in two installments on or before _____ and _____.
4. **Accounts:** You must keep accurate management accounts for the grant and its application, and keep records adequate to enable the use of grant funds to be checked readily.
5. **Confidentiality:** You **must not** acknowledge the assistance of the Foundation in any published or display material. The receipt of this Grant is to remain anonymous and confidential.
6. **Report:** Funding Review reports are required by 30 June _____ with a final report by 31st December _____. The report is to be completed online at www.chessed.org.au
7. **Refund:** If you can't complete the Project/Purposes as provided in the application, please let us know and whether there is a suitable project or purposes for the application of any remaining amount of the Grant. The Foundation may require reasons for the inability to complete and may require unused portions to be repaid.

If you agree to accept the Grant on the above conditions, please sign and date the acceptance below.

Signed for and on behalf of **The Chessed Foundation Pty Ltd ACN 615 606 052**

by:

sign here ► _____ *print name* _____

Acceptance

Name of **Recipient** _____ ABN _____

accepts the grant and agrees to the above conditions.

Signed for and on behalf of **Recipient** by:

sign here ► _____ *print name* _____ *Dated* _____