*Evan Parry House, 43 Princes St, PO Box 1131, Dunedin 9054*

*phone: 03 477 7365 or 0800 76 22 22 fax: 03 477 6736 email: synod.otago.southland@xtra.co.nz*

**Mission & Evangelism Funding Evaluation**

**Evaluation of project:**

Explain the steps you have taken to date to evaluate the effectiveness of your project.

What was the outcome?

How do you consider Synod’s funding has contributed to the outcome of your project?

 *turn over >*

**Parish:**

**Project purpose and description:**

**Allocation:**

**Financial Accountability:**

Give details of how much of your allocation has been spent to date, and on what services:

If your allocation has not been fully spent to date, explain why. State how much of the allocation remains in your bank accounts.

I/we certify that the sum of $......................... received from Synod’s Mission & Evangelism Fund has been/is being used for the purpose stated in our application. The above information provides an accurate record of our allocation expenditure.

Name: ……………………………………………. Signature: …………………………………….

Authorised position: ………………………………………………..

Address: …………………………………………...………………………………………………………..

………………………………………………………………………………………………………………..

Phone 03 ………………….. Date: … / … / …

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Please forward this completed form to the Synod Executive Officer, P O Box 1131, Dunedin, 9054 or Email: synod.otago.southland@xtra.co.nz by 15 December 2022***