**Example only**

Commonwealth Standard Grant Agreement

between

the Commonwealth represented by Department of Health and Aged Care

and

[Legal Entity Name]

# Grant Agreement

Once completed, this document, together with each set of Grant Details and the Commonwealth Standard Grant Conditions (Schedule 1), forms an Agreement between the Commonwealth of Australia (the Commonwealth) and the Grantee.

# Parties to this Agreement

## The Grantee

|  |  |
| --- | --- |
| Full legal name of Grantee  | [Program Schedule Organisation Legal Name] |
| Legal entity type (e.g. individual, incorporated association, company, partnership etc)  | [Program Schedule Organisation Party Type] |
| Trading or business name  | [Program Schedule Organisation Trading Name] |
| Any relevant license, registration or provider number  | Print blank |
| Australian Company Number (ACN) or other entity identifiers  | Print blank |
| Australian Business Number (ABN)  | [Program Schedule Organisation ABN]  |
| Registered for Goods and Services Tax (GST)  | Print blank |
| Date from which GST registration was effective  | Print blank |
| Registered office (physical/postal)  | [Program Schedule Organisation Physical Address] |
| Relevant business place (if different)  | Print blank |
| Telephone  | [Program Schedule Legal Organisation Phone Number] |
| Fax  | [Program Schedule Legal Organisation Fax Number] |
| Email  | [Program Schedule Organisation General Email] |

**The Commonwealth**

The Commonwealth of Australia represented by Department of Health and Aged Care

23 Furzer Street PHILLIP ACT 2606

ABN 83 605 426 759

# Background

The Commonwealth has agreed to enter into this Agreement under which the Commonwealth will provide the Grantee with one or more Grants for the purpose of assisting the Grantee to undertake the associated Activity.

The Grantee agrees to use each Grant and undertake each Activity in accordance with this Agreement and the relevant Grant Details.

# Scope of this Agreement

This Agreement comprises:

1. this document;
2. the Supplementary Terms from the Clause Bank (if any);
3. the Standard Grant Conditions (Schedule 1);
4. the Grant Details;
5. any other document referenced or incorporated in the Grant Details.

Each set of Grant Details, including Supplementary Terms (if any), only applies to the particular Grant and Activity covered by that set of Grant Details and a reference to the ‘Agreement’ in the Grant Details or the Supplementary Terms is a reference to the Agreement in relation to that particular Grant and Activity. If there is any ambiguity or inconsistency between the documents comprising this Agreement in relation to a Grant, the document appearing higher in the list will have precedence to the extent of the ambiguity or inconsistency.

This Agreement represents the Parties' entire agreement in relation to each Grant provided under it and the relevant Activity and supersedes all prior representations, communications, agreements, statements and understandings, whether oral or in writing.

Certain information contained in or provided under this Agreement may be used for public reporting purposes.

# Grant Details

|  |  |
| --- | --- |
| **Organisation ID:** | [Program Schedule Organisation ID] |
| **Agreement ID:** | [Agreement ID] |
| **Program Schedule ID:** | [Program Schedule ID] |

* 1. **Purpose of the Grant**

The purpose of the Grant is to:

Provide funding to deliver the Activity described in Item B Activity in accordance with the objectives of the Disability Support for Older Australians (DSOA) Program which provides continuity of support to older people with disability who were not eligible for the National Disability Insurance Scheme (NDIS) when it was rolled out.

The intended outcomes of the DSOA Program are that:

1. this cohort of older people with disability aged 65 years and over (or 50 years and over for Aboriginal and Torres Strait Islander people):
2. achieve similar outcomes to those they were achieving prior to the introduction of the Program;
3. supported to be as independent as possible; and
4. have their human rights upheld in the provision and receipt of the Services.
5. the wellbeing of this cohort of Older People with disability is maintained through the delivery of consistent, timely, high quality services and supported transition into appropriate programs such as aged care as their circumstances change and following consultation with the Older Person and their carer/advocate/nominee; and
6. carers and care relationships are supported through the provision of Respite Services to Older People with disability.

The objectives of the DSOA Program are to:

1. deliver high quality care, support and services to Clients;
2. support Clients through the direct service delivery of planned Respite Services which allow families and other regular carers to take a break from their usual caring duties and support and maintain the care relationship, while providing a positive experience for the person with disability;
3. provide services that are socially and culturally appropriate and free from discrimination to all Clients, including those with special needs;
4. facilitate Client choice and enhance the independence and wellbeing of Clients and ensure Services are responsive to their needs;
5. provide flexible, timely Services that are responsive to local needs;
6. take into account the protection and promotion of the human rights of persons with disabilities in all policies of the Program; and
7. support Clients to be informed about aged care service options and support their transition into this care where appropriate.

The DSOA Program objectives are detailed in the DSOA Program Manual.

This Grant is being provided under, and these Grant Details form part of, the Agreement between the Commonwealth and the Grantee.

The Grant is being provided as part of the Disability Support for Older Australians Program.

# Individual Support Package -

* 1. **Activity**

#### Objective

#### To provide each client with a tailored Individual Support Package that includes the client’s goals and planned outcomes and to enable each client to develop skills to live as autonomously as possible.

#### Description

The Grantee agrees to carry out the Activity as described:

* in this Grant Agreement
* in Appendix A of the DSOA Program Manual to eligible clients identified for this Activity; and
* in accordance with the Individual Support Package template at Appendix D of the DSOA Program Manual.

### B1.1 Conduct of the Activity

B1.1.1 Your Organisation must carry out the Activity in accordance with this Agreement and each relevant Individual Support Package (ISP) for the Activity and:

1. within the Activity Period and so as to meet any Milestones and other timeframes and requirements specified in this Agreement;
2. diligently, efficiently, effectively and in good faith to a high standard and so as to achieve the Program’s Objectives and achieve value with the Grant funds;
3. so as to ensure that Your Organisation and Your Organisation’s Personnel comply with:
4. all applicable Laws, including maintaining all qualifications, permits, registrations and licenses required for the lawful performance of the Activity;
5. any codes of ethics, regulations or other industry standards relevant to the Activity;
6. any Commonwealth policy specified in the DSOA Program Manual or other policy of which the Department otherwise gives Your Organisation notice;
7. the NDIS Quality and Safeguards Commission Practice Standards, available from the NDIS Quality and Safeguards Commission website; and
8. any training or qualification requirements specified in this Agreement and the DSOA Program Manual.

B1.1.2 Without limiting clause above, Your Organisation must perform this Agreement and the Activity in accordance with:

1. the principles in the Statement for Australia’s Carers set out in Schedule 1 to the Carer Recognition Act 2010 (Cth) including ensuring Your Organisation and Your Organisation’s Personnel are aware of, understand and act in accordance with the Statement for Australia’s Carers; and
2. the NDIS practice standards and Quality Indicators.

B1.1.3 To deliver services under the DSOA Program, Your Organisation must be registered, with the NDIS Quality and Safeguards Commission.

B1.1.4 If Your Organisation is not registered with the NDIS Commission, Your Organisation may apply to the Department for that entity to be exempt from registration.

B1.1.5 Any exemption request will be considered on a case by case basis and the Department will only grant an exemption in exceptional circumstances and to the extent, and subject to any conditions, that the Department at its sole discretion considers appropriate.

B1.1.6 Any exemption granted by the Department only applies to the extent, and in respect of an entity, specified in the exemption.

B1.1.7 The entity must comply with:

1. the requirements of this Agreement
2. the NDIS Code of Conduct
3. the NDIS Complaints Rule; and
4. any other requirements in the NDIS Act that apply to NDIS providers who are not registered.

B1.1.8 Your Organisation is required to monitor and respond to Clients’ needs on an ongoing basis and conduct regular assessments of each Client’s service needs in accordance with the requirements in the DSOA Program Manual under the section titled - Client Reviews.

B1.1.9 Your Organisation remains fully responsible for the performance of this Agreement and the Activity and will not be relieved of that responsibility because of any:

1. involvement by the Commonwealth in the performance of the Activity;
2. payment of the Grant funds to Your Organisation for the Activity;
3. Subcontracting or sub-subcontracting of the Activity;
4. acceptance by the Department of any Report; or
5. acceptance by the Department of any Specified Personnel.

B1.1.10 Your Organisation acknowledges that under section 137.1 of the Criminal Code Act 1995 (Cth), giving false or misleading information to the Commonwealth is a serious offence.

B1.1.11 The amount of the management fee is 1% of the total Client Funds specified in the Client’s Individual Support Package for all of Your Organisation’s Clients.

### B2.1 Individual Support Package (ISP)

B2.1.1 Before Your Organisation provides any services to a Client as part of the Activity, Your Organisation must enter into an ISP with that Client (or their carer, advocate or representative) using the form approved by the Department at Appendix D in the DSOA Program Manual that sets out:

1. the Client Funds and Services that the Commonwealth has approved for the Client under the Program;
2. the complaint procedures that Your Organisation is required to make available to Clients under this Agreement; and
3. any Client Contributions that Your Organisation is permitted to charge a Client under clause B3.1 under this Agreement.

B2.1.2 The ISP must be consistent with Your Organisation’s obligations in this Agreement and must include all other requirements specified in the DSOA Program Manual. ISP's need to be submitted to the Department within 10 days of being signed and completed.

B2.1.3 Your Organisation must:

* + - 1. comply with the terms of each ISP in conducting the Activity in respect of the relevant Client and ensure that Your Organisation is able to amend or cease provision of services under an ISP if Your Organisation ceases to receive Client Funds for those Services in respect of that Client;
			2. where a Client’s needs change, agree a variation of this grant agreement and then vary the relevant ISP with the Client in accordance with the DSOA Program Manual to reflect that change; and
			3. provide a copy of each Client’s original ISP, and any varied ISP, to the Department within 10 days of the ISP being signed by the Client or their carer, advocate or representative.

### B2.1.4 Your Organisation must ensure the Client consents to the provision of the ISP to an Independent Assessor and the Department in the Client’s ISP.

### B2.1.5 In the event of any conflict or inconsistency between this Agreement and an ISP, the terms of this Agreement prevail.

### B2.1.6 The ISP must be revised with the client every 12 months and updated ISP submitted to the Department within 10 days of the ISP being signed by the client or their carer, advocate or representative.

### B3.1 Client Contributions

B3.1.1 Your Organisation may only charge a Client an amount of Client Contributions as agreed for a Service specified in the Client’s ISP if Your Organisation charged the Client a fee for the provision of that Service under a former state and territory administered specialist disability program and prior to the Client receiving services under the CoS Programme.

B3.1.2 All such Client Contributions must be clearly set out in the relevant Client’s ISP and comply with the Client Contributions principles and requirements in the DSOA Program Manual under the section titled – Client Contributions.

B3.1.3 The amount of Client Contributions that Your Organisation charges a Client for a Service must not exceed the amount that the Client was charged for that Service prior to the Client’s transition to the Commonwealth Continuity of Support (CoS) Programme and may only be adjusted annually by up to the amount of the annual consumer price index increase.

B3.1.4 Grant funds must not be used to pay for any Client Contributions. B3.1.5 Your Organisation may use Client Contributions for any purpose.

### B4.1 Notification of changes

B4.1.1 Your Organisation must notify the Department of the following changes or events in accordance with the DSOA Program Manual:

1. a Client suspending Services for a continuous period of 3 months or more;
2. a Client permanently ceasing to access all Services specified in their ISP;
3. a Client not accessing any Services specified in their ISP for a continuous period of 12 months or more;
4. a Client seeking to transfer from Your Organisation; and
5. any other changes or events that the DSOA Program Manual requires be notified to the Department.

B4.1.2 Your Organisation must:

1. provide the Department with a Change Request notifying the Department of a change under clause B4.1.1 (a) (b), (c), (d) or (e), within 14 days after that change occurs;
2. provide the Department with a Change Request notifying the Department of a change under clause B4.1.1 (d) at least 6 weeks before any proposed Client transfer will occur in accordance with the DSOA Program Manual;
3. include the details of the relevant Client change in the Change Request required under this clause B4.1.2, including:
4. the information, and any attachments, specified in the DSOA Program Manual or otherwise required by the Department; and
5. your Organisation’s calculation of the required funding adjustment; and
6. the date that the change is proposed to occur, supported by evidence satisfactory to the Department;
7. comply with any applicable requirements or processes set out in the DSOA Program Manual; and
8. in respect of Client transfers, do all things reasonably necessary to facilitate any transfers (including providing the new service coordinator with all relevant information about the relevant Client).

### B5.1 Reviews

### B5.1.1 Your Organisation must conduct a review of the Services provided to each of Your Organisation’s Clients annually, and as otherwise required to meet a Client's changing needs, in accordance with the requirements of the DSOA Program Manual. Evidence of the client's annual review needs to be submitted to the Department within 10 days of completion.

### B5.1.2 Your Organisation may use the Management Fee to cover the costs of any reviews under this clause

### B5.1.3 If a review identifies changes required in the Services delivered to a Client, Your Organisation must comply with the requirements and processes to manage those changes as set out in the DSOA Program Manual.

### B5.1.4 Where your Organisation considers that a change identified pursuant to clause B4.1 requires a change to the Client Funds specified in the ISP for a Client, Your Organisation may submit a Change of Needs application specifying the date on which the change is expected to occur and seeking the Department’s approval to alter the Client Funds for the Client. The Change of Needs application must include the information and any attachments specified in the DSOA Program Manual or otherwise required by the Department.

### B5.1.5 Where Your Organisation requests a change to a Client’s Services that requires an increase of $20,000 (GST exclusive) or more to the Client Funds for the Client over a 12 month period, or the Department otherwise requests, the Change of Needs application in accordance with clause B5.1.4 must attach and be supported by an assessment by an Independent Assessor in accordance with the requirements set out in the DSOA Program Manual.

### B5.1.6 The Department will pay the costs of the Independent Assessor providing an assessment in accordance with clause B5.1.5.

### B5.1.7 The Department may approve some or all of a Change of Needs application at its sole discretion and in accordance with the processes set out in the DSOA Program Manual.

### B5.1.8 Retrospective funding in a Change of Needs application is out of scope and will not be considered.

### B5.1.9 Your Organisation must within 10 days reflect any Department-approved changes to a Client’s Services or Client Funds in an updated ISP between Your Organisation and the Client and this updated ISP submitted to the Department.

### B5.1.10 Your Organisation must complete a quarterly DSOA service coordinator verification statement, on the status of your client’s living circumstances and confirmation of any client changes including any significant under-deliveries.

### B6.1 Service Continuity

B6.1.1 Your Organisation must have in place a Business Continuity Plan and a Transition-Out Plan in accordance with the processes set out in the DSOA Program Manual.

B6.1.2 Your Organisation must update its Business Continuity Plan and Transition-Out Plan on a regular basis to ensure they address any new requirements, changes or risks that may materially affect Your Organisation’s ability to comply with its continuity of Services or transition obligations.

B6.1.3 Your Organisation must make the Business Continuity Plan and Transition-Out Plan available to the Department on request.

B6.1.4 Your Organisation must, in good faith, cooperate and reasonably assist the Department and any nominee of the Department to achieve the efficient transition of, and continuity of services for, Clients in accordance with the relevant parts of the Transition-Out Plan and the DSOA Program Manual under section titled – Client Transfers and Exits, as directed by the Department. The orderly transition of the Activity (which may, at the Department’s discretion, be transitioned in whole or part) including the transfer of any Clients, Assets, unspent Grant funds and Client information in the event of the expiry or termination.

## Performance Indicators

The Activity will be measured against the following Performance Indicator/s:

|  |  |
| --- | --- |
| **Performance Indicator Description** | **Measure** |
| All requirements of the grant agreement have been met. | Information is provided to an acceptable standard in the performance reports as detailed in the Performance Report template |
| Activities are completed according to the scope and timeframes outlined in the DSOA Program Manual | The Department and Your Organisation agree that the requirements outlined in the funding agreement have been completed, within the timeframes specified. |

## Location Information

The Activity will be delivered from the following site location/s:

|  |  |  |
| --- | --- | --- |
| **Location Type** | **Name** | **Address** |
| [Activity Location Type/Subtype]  | [Organisation/Venue Name] [Activity Item Text] Venue Name if not Head Office  | [Organisation/Venue Address] [Activity Item Text] Venue Name if not Head Office  |

## Service Area Information

The Activity will service the following service area/s:

|  |  |
| --- | --- |
| **Type** | **Service Area** |
| [Service Area Type] | [Service Area Value] |

# Duration of the Grant

The Activity starts on 1 January 2024 and ends on 30 June 2026, which is the **Activity Completion Date**.

The Agreement ends on 30 November 2026 or when the Commonwealth accepts all of the reports provided by the Grantee and the Grantee has repaid any Grant amount as required under this Agreement, which is the **Agreement End Date.**

# Payment of the Grant

The total amount of the Grant is [Overall Activity Value for all financial years] excluding GST (if applicable).

A break down by Financial Year is below:

|  |  |
| --- | --- |
| **Financial Year** | **Amount (excl. GST)** |
| [Activity Financial Year X] | [Overall Activity Value for Year X] |

The Grantee must ensure that the Grant is held in an account in the Grantee’s name and which the Grantee controls, with an authorised deposit-taking institution authorised under the Banking Act 1959 (Cth) to carry on banking business in Australia.

The Grantee’s nominated bank account into which the Grant is to be paid is:

|  |  |
| --- | --- |
| **BSB Number**  | [AS Bank Account BSB Number]  |
| **Financial Institution**  | [AS Bank Account Financial Institution]  |
| **Account Number**  | [AS Bank Account]  |
| **Account Name**  | [AS Bank Account Name]  |

The Grant will be paid in instalments by the Commonwealth in accordance with the agreed Milestones, and compliance by the Grantee with its obligations under this Agreement.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Milestone** | **Anticipated date** | **Amount (excl. GST)** | **GST (if applicable)** | **Total****(incl. GST if applicable)** |
| Payment for the period 1 January 2024 - 31 March 2024 for the Activity described in Item B. Activity | 1 January 2024 | $[Activity Milestone GST exclusive amount] | $[Calculated field based on Activity Tax Code] | $[Calculated field]] |
| *Repeated quarterly for duration of agreement* | *Repeated quarterly for duration of agreement* | [Calculation] | [Calculation] | [Calculation] |
| **Total Amount** | [Calculation] | [Calculation] | [Calculation] |

## Invoicing

The Grantee agrees to allow the Commonwealth to issue it with a Recipient Created Tax Invoice (RCTI) for any taxable supplies it makes in relation to the Activity.

## Taxes, duties and government charges

The Grantee agrees to pay all taxes, duties and government charges imposed or levied in Australia or overseas in connection with the performance of this Agreement, except as provided by this Agreement.

If Goods and Services Tax (GST) is payable by a supplier on any supply made under this Agreement, the recipient of the supply will pay to the supplier an amount equal to the GST payable on the supply, in addition to and at the same time that the consideration for the supply is to be provided under this Agreement.

The Parties acknowledge and agree that they each:

* 1. are registered for GST purposes;
	2. have quoted their Australian Business Number to the other; and
	3. must notify the other of any changes to the matters covered by this clause.

The Grantee agrees that the Commonwealth will issue it with a recipient created tax invoice for any taxable supply it makes under this Agreement.

# Reporting

The Grantee agrees to create the following reports in the form specified and to provide the reports to the Commonwealth representative in accordance with the following.

|  |  |  |
| --- | --- | --- |
| **Milestone** | **Information to be included** | **Due Date** |
| Other Report | The Quarterly Provider Verification Statement should be submitted to the department as described in Item B.5.1.10 and Item E.4 Other Reports - Provider verification statement. | 31 January 2024 |
| Other Report | The Quarterly Provider Verification Statement should be submitted to the department as described in Item B.5.1.10 and Item E.4 Other Reports - Provider verification statement. | 30 April 2024 |
| Other Report | The Quarterly Provider Verification Statement should be submitted to the department as described in Item B.5.1.10 and Item E.4 Other Reports - Provider verification statement. | 31 July 2024 |
| Financial Acquittal Report | The Report should contain financial data for the period 1 January 2024 to 30 June 2024 as described in Item E.3 Financial Acquittal Reports. | 31 August 2024 |
| Performance Report | The Report should contain the approach to service delivery for the period 1 January 2024 to 30 June 2024 as described in Item E.1 Performance Reports | 31 August 2024 |
| Other Report | The Quarterly Provider Verification Statement should be submitted to the department as described in Item B.5.1.10 and Item E.4 Other Reports - Provider verification statement. | 31 October 2024 |
| Other Report | The Quarterly Provider Verification Statement should be submitted to the department as described in Item B.5.1.10 and Item E.4 Other Reports - Provider verification statement. | 31 January 2025 |
| Other Report | The Quarterly Provider Verification Statement should be submitted to the department as described in Item B.5.1.10 and Item E.4 Other Reports - Provider verification statement. | 30 April 2025 |
| Other Report | The Quarterly Provider Verification Statement should be submitted to the department as described in Item B.5.1.10 and Item E.4 Other Reports - Provider verification statement. | 31 July 2025 |
| Financial Acquittal Report | The Report should contain financial data for the period 1 July 2024 to 30 June 2025 as described in Item E.3 Financial Acquittal Reports. | 31 August 2025 |
| Performance Report | The Report should contain the approach to service delivery for the period 1 July 2024 to 30 June 2025 as described in Item E.1 Performance Reports | 31 August 2025 |
| Other Report | The Quarterly Provider Verification Statement should be submitted to the department as described in Item B.5.1.10 and Item E.4 Other Reports - Provider verification statement. | 31 October 2025 |
| Other Report | The Quarterly Provider Verification Statement should be submitted to the department as described in Item B.5.1.10 and Item E.4 Other Reports - Provider verification statement. | 31 January 2026 |
| Other Report | The Quarterly Provider Verification Statement should be submitted to the department as described in Item B.5.1.10 and Item E.4 Other Reports - Provider verification statement. | 30 April 2026 |
| Performance Report | The Report should contain financial data for the period 1 July 2025 to 30 June 2026 as described in Item E.3 Financial Acquittal Reports. | 31 August 2026 |
| Financial Acquittal Report | The Report should contain the approach to service delivery for the period 1 July 2025 to 30 June 2026 as described in Item E.1 Performance Reports | 31 August 2026 |

## Performance Reports

**Annual Performance Report**

Each Performance Report required in Item E for the Activity is to contain information on progress towards meeting the identified Performance Indicators for all Activities at Item B Activity. Each Performance Report should contain:

1. an evaluation of the performance, benefits and outcomes of the entire Activity including an evaluation of the Activity against the outcomes and indicators in Item B;
2. a discussion of any issues, problems, or delays that Your Organisation experienced in its performance of the Activity and an explanation of how Your Organisation dealt with those issues, problems and delays; and
3. any learning outcomes from the Activity; the Grantee is required to finalise the Performance Report by the due date set out at Item E.

Performance Reports must be considered satisfactory by the Department before the Milestone will be met.

## Activity Work Plan

None Specified

## Financial Acquittal Reports

**Annual Financial Declaration**

Your Organisation must provide the Department with an annual financial declaration for each Financial Year of the Activity.

The annual financial declaration must be prepared by 31 August following the end of the Financial Year to which it relates.

Each annual financial declaration must contain a detailed financial statement that separately sets out the following information for the Financial Year to which it relates:

1. the Client Funds that have been received, as well as spent and committed, by Your Organisation to date; and
2. the Management Fee Funds that have been received, as well as spent and Committed, by Your Organisation to date for the purposes of administering the Agreement.

Each annual financial declaration must be certified by Your Organisation’s Chief Financial Officer or Chief Executive Officer and must be in the form specified by the Department.

If the Department requests, Your Organisation must have an annual financial declaration audited by a person who is:

1. not a principal, member, shareholder officer, agent, Subcontractor, employee or related entity of Your Organisation or of a related body corporate (the terms ‘related entity’ and ‘related body corporate’ have the same meaning as in section 9 of the Corporations Act 2001 (Cth)); and
2. not the accountant who prepared the financial declaration.

The Grantee agrees to pay all taxes, duties and government charges imposed or levied in Australia or overseas in connection with the performance of this Agreement, except as provided by this Agreement.

The Parties acknowledge and agree that they each:

1. are registered for GST purposes;
2. have quoted their Australian Business Number to the other, and
3. must notify the other of any changes to the matters covered by this clause.

The Grantee agrees that the Commonwealth will issue it with a recipient created tax invoice for any taxable supply it makes under this Agreement.

If Goods and Services Tax (GST) is payable by a supplier on any supply made under this Agreement, the recipient of the supply will pay to the supplier an amount equal to the GST payable on the supply, in addition to and at the same time that the consideration for the supply is to be provided under this Agreement;

1. are registered for GST purposes;
2. have quoted their Australian Business Number to the other, and
3. must notify the other of any changes to the matters covered by this clause.

The Grantee agrees that the Commonwealth will issue it with a recipient created tax invoice for any taxable supply it makes under this Agreement.

## Other Reports

**Quarterly Provider Verification Statement**

Your Organisation is required to submit a verification statement to the Department each quarter. The verification statement must contain verification on all your client’s living circumstances and confirmation of any client changes including significant under-deliveries, as per Item B.5.1.10.

The DSOA service coordination statement must be submitted by the COB due date of each quarter as per Item B.5.1.10. and considered satisfactory by the Department before the next quarterly milestone payment will be paid.

# Party representatives and address for notices

## Grantee's representative and address

|  |  |
| --- | --- |
| **Grantee’s representative name**  | [Activity Primary Contact Title] [Activity Primary Contact First Name] [Activity Primary Contact Last Name]  |
| **Position**  | [Activity Primary Contact Employed As/Position Title]  |
| **Business hours telephone**  | [Activity Contact Phone Telephone Number]  |
| **E-mail**  | [Activity Primary Contact Email]  |

**Commonwealth representative and email address**

|  |  |
| --- | --- |
| **Business hours telephone**  | [Activity Managing Office Telephone]  |
| **E-mail**  | [Activity Managing Office Email]  |

The Parties' representatives will be responsible for liaison and the day-to-day management of the Grant, as well as accepting and issuing any written notices in relation to the Grant.