Al Adopt Program Accountant Declaration

Applicants Name	
Applicants ABN	
Role of person making declaration	[e.g. Accountant or Chief Financial Officer (CFO)]
Name	
Contact details	
Qualification	 □ Chartered Accountant □ Certified Practicing Accountant □ CPA Australia □ Chartered Accountants Australia and New Zealand □ Institute of Public Accountants
Membership number	
I declare that I have no conflict of interest with [applicant name]. On the basis of the evidence [applicant name] has supplied to me, I can confirm that [applicant name] meets the financial and trading eligibility requirements as specified in the AI Adopt program grant opportunity guidelines.	
On the basis of the evidence [applicant name] has supplied to me, I can confirm that [applicant name] has the ability to meet its share of any relevant funding obligations as stated in the application form.	
Signature	
Signed on this day of	20