[INSERT NAME & ADDRESS]

[INSERT AUKW REFERENCE]

Thursday, 30 January 2025

Dear\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Age Well Central Fund: OFFER LETTER**

I am pleased to write to your organisation, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, on behalf of Age UK Wandsworth to inform you that a grant of £\_\_\_\_\_\_\_\_\_\_\_ has been awarded to your organisation from the Age Well Central Fund in relation to your project \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**Conditions of award of grant**

The offer and our payment of the grant is subject to your acceptance of the attached terms and conditions and submission of the following:

1. A signed copy of this Offer Letter, signed by at least one Trustee/Director, other than the named contact.
2. A signed copy of the Grant Agreement, signed by at least one Trustee/Director, other than the named contact.
3. Confirmation of any third-party funding note as part of matched funding in your application approved or received.
4. A recent bank statement (redacted) showing name, address of the organisation and bank/building society details including the Sort code and Account Number.
5. If the Grant is a contribution towards part or all of the cost of a paid position, you must provide Age UK Wandsworth with confirmation of the funded post being filled and a starting date. A DBS (Disclosure and Barring Service) number must also be provided. If the grant is continuation funding for part or all the cost of a paid post, confirmation that the post is filled must be provided.

All new projects must commence within 3 months of the grant offer being accepted.

**Grant payment**

The grant will be paid in 1 instalment in accordance with the PAYMENT Section of the Grant Agreement and only after the grant conditions above have been met.

**Monitoring and reporting**

We require a quarterly monitoring form and an end of project report to be completed. We request that these are completed and submitted no later than 30 days after the dates detailed in the schedule below:

|  |  |
| --- | --- |
| Project start date |  |
| 6 month monitoring form (if applicable) |  |
| End of Project Report |  |

If for any reason these dates cannot be met, please contact Age UK Wandsworth to explain why and to agree new dates if reasonable.

**Publicity**

We would require you to acknowledge and refer to Age UK Wandsworth in publicity or promotional materials regarding your grant funded project. Please contact Age UK Wandsworth for a copy of logo for use with promotional materials.

Please sign, date and return an original copy of this grant offer letter by post to the address at the top of this correspondence.

[INSERT AUKW REFERENCE]

[INSERT PROJECT NAME]

[INSERT GRANT AMOUNT]

We confirm that we are duly authorised by the Organisation, and we acknowledge on behalf of the Organisation that we have read this Offer Letter and the terms and conditions and accept the offer of the grant based on the attached Grant Agreement and included reporting deadlines.

Signatory 1

|  |  |
| --- | --- |
| **Name** |  |
| **Position (Director/Trustee/Authorised signatory)** |  |
| **Signed** |  |
| **Dated** |  |

Signatory 2

|  |  |
| --- | --- |
| **Name** |  |
| **Position (Director/Trustee/Authorised signatory)** |  |
| **Signed** |  |
| **Dated** |  |