Annex J

To : Commission on Children Secretariat

10/F, West Wing,

Central Government Offices,

2 Tim Mei Avenue, Tamar, Hong Kong

**Funding Scheme for Children’s Well-being and Development**

**Progress Report**

**(for the period** \_\_\_\_\_\_\_\_\_\_\_\_\_ (dd/mm/yyyy) to \_\_\_\_\_\_\_\_\_\_\_\_\_ (dd/mm/yyyy)**)**

**(To be completed for all projects except**

**one-year smaller-scale projects without advance payment)**

|  |  |  |  |
| --- | --- | --- | --- |
| Project No. |  | Title of Project |  |
| Name of Organisation | |  | |
| Project Implementation Period  (dd/mm/yyyy to dd/mm/yyyy) | |  | |

**Up-to-date Financial Summary of the Project (as at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**(dd/mm/yyyy)**):**

1. **Income for the Whole Project**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Item | Nature | | Current Budget/  Approved Funding Amount[[1]](#footnote-1)  ($) | Actual Amount Received($) |
|  | Participants’ Fees (if applicable) | | |  | | --- | |  | | |  | | --- | |  | |
|  | Contribution from the Funded Organisation (if applicable) | | |  | | --- | |  | | |  | | --- | |  | |
|  | Sponsorship and Donation (if applicable) | | |  | | --- | |  | | |  | | --- | |  | |
|  | Others (if applicable) [Please specify: \_\_\_\_\_\_\_\_ ] | | |  | | --- | |  | |  | | |  | | --- | |  | |  | |
|  |  | **Sub-total (I)** | |  | | --- | |  | | |  | | --- | |  | |
|  | Funding from the Commission on Children | **Sub-total (II)** | |  | | --- | |  | |  | | |  | | --- | |  | |  | |
| **Total (I) + (II)** | | | |  | | --- | |  | |  | | |  | | --- | |  | |  | |

**(ii) Expenditure**

|  |  |
| --- | --- |
| Nature | Actual Amount Expended[[2]](#footnote-2)  ($) |
| Total project expenses to be funded by the Commission on Children | |  | | --- | |  | |

**Details of Activities Held**

**(Please use separate sheets if space provided is insufficient)**

|  |  |  |
| --- | --- | --- |
| Activity (1) | | |
| Name of Activity |  | |
| Date(s) and Time of Activity | Proposed Date(s) and Time | Actual Date(s) and Time |
|  |  |
| Number of Sessions | Target# | Actual |
|  |  |
| Venue |  | |
| No. of Participants | Target# | Actual |
|  |  |
|  |  |  |
| Activity (2) | | |
| Name of Activity |  | |
| Date(s) and Time of Activity | Proposed date(s) and Time | Actual date(s) and Time |
|  |  |
| Number of Sessions | Target# | Actual |
|  |  |
| Venue |  | |
| No. of Participants | Target# | Actual |
|  |  |
|  |  |  |
| Activity (3) | | |
| Name of Activity |  | |
| Date(s) and Time of Activity | Proposed date(s) and Time | Actual date(s) and Time |
|  |  |
| Number of Sessions | Target# | Actual |
|  |  |
| Venue |  | |
| No. of Participants | Target# | Actual |
|  |  |

**Details of Activities to be Conducted**

**(Please use separate sheets if space provided is insufficient)**

|  |  |
| --- | --- |
| Activity (1) | |
| Name of Activity |  |
| Number of Sessions |  |
| Date(s) of Activity |  |
| Venue |  |
| Target No. of Participants# |  |
|  |  |
| Activity (2) | |
| Name of Activity |  |
| Number of Sessions |  |
| Date(s) of Activity |  |
| Venue |  |
| Target No. of Participants# |  |
|  |  |
| Activity (3) | |
| Name of Activity |  |
| Number of Sessions |  |
| Date(s) of Activity |  |
| Venue |  |
| Target No. of Participants# |  |

# Same as that provided in the funding application form. However, if approval has been obtained from the Commission on Children for adjustment to the number of sessions or target number of participants, please fill in the revised figure.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name\*: |  |  | Post: |  |
| Tel. No.: |  |  | Fax No.: |  |
| Signature: |  |  | Date: |  |

\* Name of authorised person of the funded organisation or officer-in-charge of the project

Appendix

**Expenditure during the period covered by this progress report**

| **Expenditure** | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| Item | Approved  Amount[[3]](#footnote-3)  ($) | Actual Expenditure | | | Remarks |
| Amount to be funded by the Scheme  ($) | Amount to be funded by other source(s) of income  ($) | Total  Amount  ($) |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |
| Total: |  |  |  |  |  |

1. For items 1 – 4, please fill in the current estimated amounts. For item 5, please fill in the total approved funding amount. If approval has been obtained from the Commission on Children for adjustment to the budget, please state the revised total funding amount. [↑](#footnote-ref-1)
2. Please fill in the Appendix if an advance payment has been received from the Commission on Children. [↑](#footnote-ref-2)
3. If approval has been obtained from the Commission for adjustment to the approved amount of an expenditure item, please fill in the revised amount. [↑](#footnote-ref-3)