Annex J

To : Commission on Children Secretariat

 10/F, West Wing,

 Central Government Offices,

 2 Tim Mei Avenue, Tamar, Hong Kong

 (Fax : 2523 1973)

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

**Progress Report**

**(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 |  |

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

**(i) Income for the Whole Project**

|  |  |  |  |
| --- | --- | --- | --- |
| Item | Nature | Current Budget/Approved Funding Amount[[1]](#footnote-1)($) | Actual Amount Received($) |
|  | Participants’ Fees (if applicable) |

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 |
|  | Contribution from the Funded Organisation (if applicable) |

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|  | Sponsorship and Donation (if applicable) |

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 |
|  | Others (if applicable)[Please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] |

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|  |  | **Sub-total (I)** |

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|  | Funding from the Commission on Children | **Sub-total (II)** |

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| **Total (I) + (II)** |

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**(ii) Expenditure**

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

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**Details of Activities Held**

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

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

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

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

1. For funding from the Commission on Children, please fill in the total approved funding amount. For other sources of income, please fill in the current estimated amounts. [↑](#footnote-ref-1)
2. Please attach duplicate copies of the certified official receipts concerned if an advance payment has been received from the Commission on Children. [↑](#footnote-ref-2)