

**Community Investment and Inclusion Fund -
Notes to CIIF - Project Quarterly Reimbursement Claim Form**

The Quarterly Reimbursement Claim Form is divided into Sections A and B:

- ◆ **Section A** is used for filling in the approved items **specified in** Schedule III – Approved Budget per the Conditions of Grant; and
- ◆ **Section B** records any financial items **not specified in** Schedule III – Approved Budget per the Conditions of Grant.

Section A

1. Approved Budget per Conditions of Grant (i.e. Columns a, a1 and a2)

Please fill in the approved items of expenditure and income specified in Schedule III – Approved Budget per the Conditions of Grant in Columns **(a1)** and **(a2)** respectively. Upon completion, the balances from Column **(a)** will be automatically calculated by the formula.

2. Cumulative Claims Up To Last Quarter (i.e. Columns b, b1 and b2)

Please copy the figures from Columns (e) and (f) of the previous quarterly form to Columns **(b1)** and **(b2)** of this form respectively. Upon completion, the balances from Column **(b)** will be automatically calculated by the formula.

(Note: No entry to this column is required for claim form of the first quarter.)

3. Attachment Index No.

Please separate all attachments by types of expenditures items of the Approved Budget and mark an index no. in order on the upper right corner, and fill in the attachment index no.s in Column “Attachment Index No.”, e.g. A1-A3 for staff salary, B1-B3 for Mandatory Provident Fund and C1-C16 for stationery.

4. Current Claims for this Quarter (i.e. Columns c, c1 and c2)

Please fill in all claimed items of expenditure and income for this quarter in Columns **(c1)** and **(c2)**. Upon completion, the balances from Column **(c)** will be automatically calculated by the formula.

5. Cumulative Claims Up-to-Date (i.e. Columns d, e, f and g)

Grantees are not required to fill in Columns **(d)** to **(g)**. The balances from the Columns will be automatically calculated by the formula upon completion of entry.

Section B

Section B mainly records any financial items not specified in Schedule III – Approved Budget per the Conditions of Grant, e.g. interest in designated bank accounts opened by CIIF-funded projects, additional income such as donation or sponsor, etc. Grantees shall note that all expenditure not specified in the Approved Budget shall not be reimbursed unless prior written approval has been obtained from the CIIF. Section B shall be completed in the same ways as Section A, except items (a), (a1) and (a2) shall be left blank. Please refer to the demonstration for completing the Quarterly Reimbursement Claim Form.

How to complete a CIIF – Project Quarterly Reimbursement Claim Form? 如何填寫社區投資共享基金 – 計劃季度申請發還款項表格?

Fill in all the Project details as stated on the Claim Form

在表格上填上有關計劃內容的資料

報告涵蓋時間:
Period covered _____ 至 To _____

受資助機構名稱:
Name of Grantee: _____

計劃名稱及編號:
Project Name and No.: _____

社區投資共享基金 – 計劃季度申請發還款項表格
CIIF - Project Quarterly Reimbursement Claim Form

計劃推行日期:
Project period: _____ 至 To _____

核准預算總額:
Total Approved Budget: _____

本季申請發還的金額:
Total Claims for this Quarter: _____

項目 Item	支出/收入項目 Expenditure/Income Items	Approved Budget per Conditions of Grant 協議核准預算			Cumulative Claims Up To Last Quarter 截至上季度累積金額			單據編號 (適用於本季度申 請發還金額) Attachment Index No. (For Current Quarterly Claim)	Current Claims for This Quarter 本季度申請發還的金額			Cumulative Claims Up-to-date 截至本季度總累積申請發還的金額			
		(a1) 支出 Expenditure	(a2) 收入 Income	(a) 核准預算 Approved Budget (a)=(a1)-(a2)	(b1) 支出 Expenditure	(b2) 收入 Income	(b) 累積金額 Cumulative Claims (b)=(b1)-(b2)		(c1) 支出 Expenditure	(c2) 收入 Income	(c) 本季申請發還 Current Claims (c)=(c1)-(c2)	(d) 總申請發還 Total Claims (d) = (b) + (c)	(e) 總支出 Total Expenditure (e)=(b1)+(c1)	(f) 總收入 Total Income (f)=(b2)+(c2)	(g) 結餘 Balance (g)=(a) - (d)
甲部 (Section A) 附註 1 (Note 1)															
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
總額 Total:		0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	
乙部 (Section B) 附註 2 (Note 2)															
	銀行利息收入 Bank Interest Income			0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
				0.00			0.00				0.00	0.00	0.00	0.00	
總額 Total:		0.00	0.00	0.00	0.00	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	

Current Claims Amount:
本季核准發還的金額: _____ (只供秘書處填寫 for CIIF office use)

附註 1 (Note 1)
甲部：根據「社區投資共享基金協議」附表III：核准預算填寫
Section A: Please refer to the Approved Budget as stated in the Condition of Grant for the CIIF.

附註 2 (Note 2)
乙部：其他在「社區投資共享基金協議」以外之計劃收入及支出，如銀行利息收入、其他活動收入及捐款等
Section B: Other project income and expenses not specified in the Condition of Grant for the CIIF, e.g. Bank Interest income, additional program income and donation, etc.

本人謹此代表受資助機構，證明上述財務報告均屬真實無誤。
I am hereby on behalf of the grantee to declare that the above financial report is true and correct.

計劃統籌人姓名:
Full Name of Project Coordinator: _____

計劃統籌人職位:
Position of Project Coordinator: _____

受資助機構蓋章:
Chop of Grantee: _____

計劃統籌人簽署:
Signature of Project Coordinator: _____

社區投資共享基金 - 計劃季度申請發還款項表格
 CIIF - Project Quarterly Reimbursement Claim Form

報告涵蓋時間: Period covered 至 To
 受資助機構名稱: Name of Grantee
 計劃名稱及編號: Project Name and No.:

計劃推行日期: Project period: 至 To
 核准預算總額: Total Approved Budget:
 本季申請發還的金額: Total Claims for this Quarter:

項目 Item	支出/收入項目 Expenditure/Income Items	Approved Budget per Conditions of Grant 協議核准預算			Cumulative Claims Up To Last Quarter 截至上季度累積金額			單據編號 (用於本季度申請發還金額) Attachment Index No. (For Current Quarterly Claim)	Current Claims for This Quarter 本季度申請發還的金額			Cumulative Claims Up-to-date 截至本季度總累積申請發還的金額						
		(a1) 支出 Expenditure	(a2) 收入 Income	(a) 核准預算 Approved Budget (a)=(a1)-(a2)	(b1) 支出 Expenditure	(b2) 收入 Income	(b) 累積金額 Cumulative Claims (b)=(b1)-(b2)		(c1) 支出 Expenditure	(c2) 收入 Income	(c) 本季申請發還 Current Claims (c)=(c1)-(c2)	(d) 總申請發還 Total Claims (d) = (b) + (c)	(e) 總支出 Total Expenditure (e)=(b1)+(c1)	(f) 總收入 Total Income (f)=(b2)+(c2)	(g) 結餘 Balance (g)=(a)-(d)			
	甲部 (Section A) 附註 1 (Note 1)																	
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
					0.00		0.00				0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Get the approved claim form for the previous quarter, copy the figures from Column (e) and (f) to Column (b1) and (b2) in claim form of current quarter
 取出上一季度已核准之發還表格, 將欄(e)及(f)的數字抄在本季度發還表格的欄(b1)及(b2)

Check the balances from Column (b) to those of Column (d) of the previous approved quarterly claim form. They should be the same. Also check the Totals of these Columns
 將欄(b)的數字與上一季度已核准之發還表格中的欄(d)的數字核對, 兩組數字應是一樣的。同時亦要核對清楚每一欄的總數

附註 1 (Note 1)
 甲部: 根據《社區投資共享基金協議》附表111: 核准預算填寫
 Section A: Please refer to the Approved Budget as stated in the Condition of Grant for the CIIF

附註 2 (Note 2)
 乙部: 其他在《社區投資共享基金協議》以外之計劃收入及支出, 如銀行利息收入、其他活動收入及捐款等
 Section B: Other project income and expenses not specified in the Condition of Grant for the CIIF, e.g. Bank Interest income, additional program income and donation, etc.

本人謹此代表受資助機構, 證明上述財務報告均屬真實無誤
 I am hereby on behalf of the grantee to declare that the above financial report is true and correct.

計劃統籌人姓名:
 Full Name of Project Coordinator: _____
 計劃統籌人職位:
 Position of Project Coordinator: _____

受資助機構蓋章:
 Chop of Grantee: _____
 計劃統籌人簽署:
 Signature of Project Coordinator: _____

社區投資共享基金 – 計劃季度申請發還款項表格
 CIIF - Project Quarterly Reimbursement Claim Form

報告涵蓋時間: 至
 Period covered: _____ To _____

受資助機構名稱:
 Name of Grantee: _____

計劃名稱及編號:
 Project Name and No.: _____

計劃推行日期: _____ 至 _____
 Project period: _____ To _____

核准預算總額:
 Total Approved Budget: _____

本季申請發還的金額:
 Current Claims Amount: _____

項目 Item	Approved Budget per Conditions of Grant 協議核准預算			Cumulative Claims Up To Last Quarter 截至上季度累積金額			單據編號 (適用於本季度申請發還金額) Attachment Index No. (For Current Quarterly Claim)	Current Claims for This Quarter 本季度申請發還的金額			Cumulative Claims Up-to-date 截至本季度總累積申請發還的金額			
	(a1) 支出 Expenditure	(a2) 收入 Income	(a) 核准預算 Approved Budget (a)=(a1)-(a2)	(b1) 支出 Expenditure	(b2) 收入 Income	(b) 累積金額 Cumulative Claims (b)=(b1)-(b2)		(c1) 支出 Expenditure	(c2) 收入 Income	(c) 本季申請發還 Current Claims (c)=(c1)-(c2)	(d) 總申請發還 Total Claims (d)=(b)+(c)	(e) 總支出 Total Expenditure (e)=(b1)+(c1)	(f) 總收入 Total Income (f)=(b2)+(c2)	(g) 結餘 Balance (g)=(e)-(d)
甲部 (Section A) 附註 1 (Note 1)			0.00			0.00				0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
										0.00	0.00	0.00	0.00	
乙部 (Section B) 附註 2 (Note 2)														
銀行利息收入 Bank Interest														
總額 Total:										0.00	0.00	0.00	0.00	

Fill in the amounts of Expenses and Income in Column (c1) and (c2) for the current quarter according to the Expenditure/Income Items. Moreover, please fill in the Attachment index no.

根據支出/收入項目，在欄(c1)及(c2)上填寫本季度的支出和收入金額，並填上單據編號

If there are other incomes collected from the project, e.g. bank interest income from the designated bank account or donation income, please fill in the types and amount of income in Section B

如有其他收入，例如由獨立銀行戶口所產生之銀行利息或其他捐款收入，可在“乙部”中的列填上有關收入項目和金額

Check the Total amount for each column and row

核對清楚每一欄和列的總數

附註 1 (Note 1)
 甲部：根據《社區投資共享基金協議》

附註 2 (Note 2)
 乙部：其他在《社區投資共享基金協議》中未列明之收入及開支。本人謹此代表受資助機構，證明本人是以此代表受資助機構，證明。

計劃統籌人姓名:
 Full Name of Project Coordinator: _____

計劃統籌人職位:
 Position of Project Coordinator: _____

Current Claims Amount:
 本季核准發還的金額: _____

(只供秘書處填)

助機構蓋章:
 Signature of Grantee: _____

統籌人簽署:
 Signature of Project Coordinator: _____

