禁毒基金2017年度
一般撥款計劃
新獲撥款項目簡介會

2018年3月21日

大　綱

1. 禁毒基金程序指引重點
2. 發放款項流程
3. 擬備「推行計劃」須注意事項
4. 問答時間

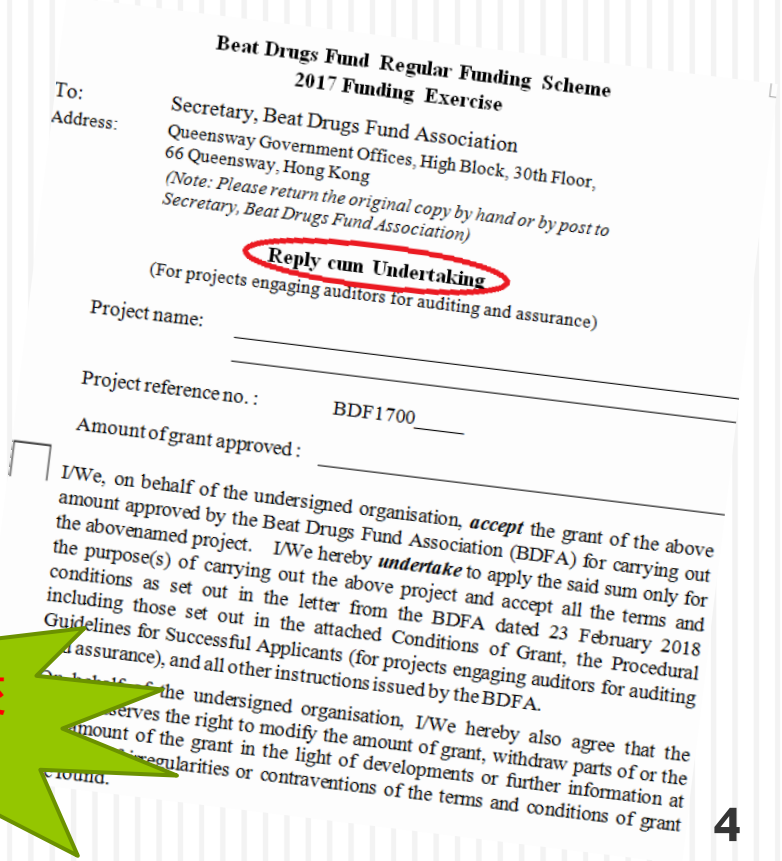
3

第一部分

禁毒基金程序指引重點

程序指引重點 – 接受撥款

- 如機構決定接受撥款，須於4月20日或以前填妥以下文件交回基金會秘書處－
  - ✓ **答覆暨承諾書**
    (Reply cum Undertaking)
  - ✓ **推行計劃**
    (Implementation Plan)



Beat Drugs Fund Regular Funding Scheme
2017 Funding Exercise

To: Secretary, Beat Drugs Fund Association

Address: Queensway Government Offices, High Block, 30th Floor,
66 Queensway, Hong Kong
(Note: Please return the original copy by hand or by post to Secretary, Beat Drugs Fund Association)

Reply cum Undertaking
(For projects engaging auditors for auditing and assurance)

Project name: _____

Project reference no. : BDF1700___

Amount of grant approved : _____

I/We, on behalf of the undersigned organisation, ***accept*** the grant of the above amount approved by the Beat Drugs Fund Association (BDFA) for carrying out the abovenamed project. I/We hereby ***undertake*** to apply the said sum only for the purpose(s) of carrying out the above project and accept all the terms and conditions as set out in the letter from the BDFA dated 23 February 2018 including those set out in the attached Conditions of Grant, the Procedural Guidelines for Successful Applicants (for projects engaging auditors for auditing assurance), and all other instructions issued by the BDFA.

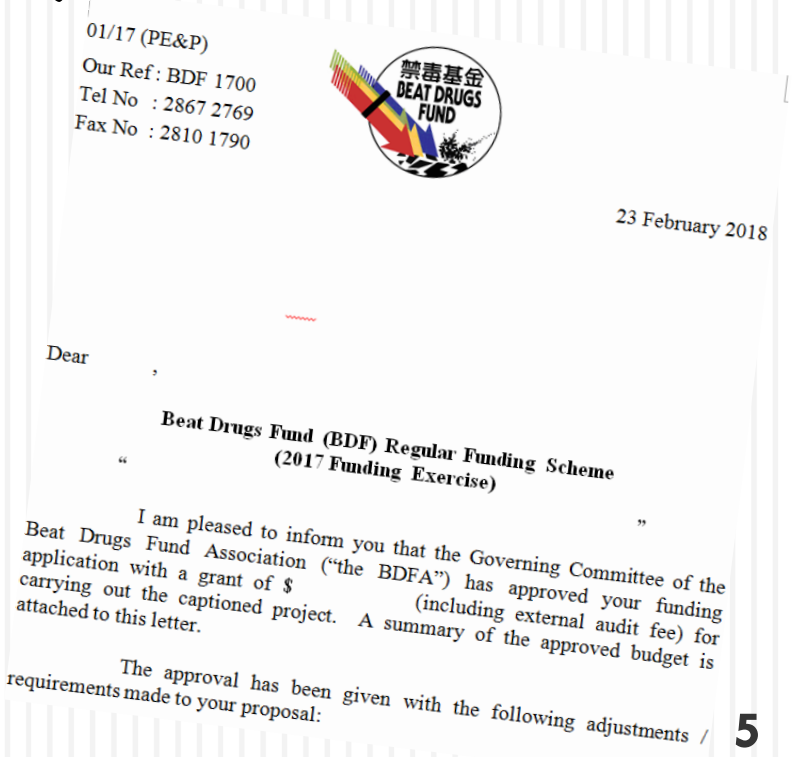
the undersigned organisation, I/We hereby also agree that the serves the right to modify the amount of grant, withdraw parts of or the mount of the grant in the light of developments or further information at regularities or contraventions of the terms and conditions of grant found.

4

郵寄或親自交回正本

程序指引重點 – 撥款用途

- 撥款須**專用**於基金會核准的用途
- 撥款必須以**經濟**、**明智**的方式用於獲批項目的範圍內，以達成目標



01/17 (PE&P)
Our Ref : BDF 1700
Tel No : 2867 2769
Fax No : 2810 1790

禁毒基金 BEAT DRUGS FUND

23 February 2018

Dear ,

Beat Drugs Fund (BDF) Regular Funding Scheme
(2017 Funding Exercise)

I am pleased to inform you that the Governing Committee of the Beat Drugs Fund Association ("the BDFA") has approved your funding application with a grant of $ (including external audit fee) for carrying out the captioned project. A summary of the approved budget is attached to this letter.

The approval has been given with the following adjustments / requirements made to your proposal:

程序指引重點 – 條款及條件

- 在推行項目時，機構須遵守以下文件訂明的所有條款及條件 –
  - ✓ 批准書
  - ✓ 撥款條件
  - ✓ 獲撥款人／機構的程序指引
  - ✓ 基金會不時發出的所有其他指示及信函

程序指引重點 – 獲准財政預算

- 機構須按照基金會批准的**財政預算**和**分項開支**使用撥款
- 如有更改，必須<u>事先</u>取得基金會書面同意

（例）分項開支：5項

Beat Drugs Fund Regular Funding Scheme
"Project "
(Project reference no. BDF1700)
Approved Budget

	Item	Amount Approved
1	Personal emolument[1]: 1 full-time Assistant Social Work Officer: $29,547 per month (first 12 months); $31,038 per month (subsequent 12 months); and MPF is included in all rates	$727,020.00
2	Publicity	$150,000.00
3	Preventive education activities *(after income)*	$100,000.00
4	Counselling materials and transportation	$50,000.00
5	External audit fee	$20,000.00
	Total	**$1,047,020.00**

Note: (1) The grantee shall observe the maximum headcount, employment period and salary approved for each job position. Annual increment may be granted only for the staff employed for the project with satisfactory continuous performance.

(2) Photocopiers and personal computers are <u>not</u> supported.

xx/17(MT) February 2018

程序指引重點 – 現金需求預測

- 機構須向基金會提交項目的「推行計劃」(Implementation Plan)，包括「每年現金需求」(Yearly Funding Requirement)預測數字
- 機構預測現金需求時，應參考撥款申請表中財政預算部份

(N) Yearly funding requirement
(Please provide the estimated expenditure on each approved budget item in each project year ...)

	Approved budget item[4]	Estimated item expenditure and income for the first project year ($)	Estimated item expenditure and income for the second project year ($)	Estimated item expenditure and income for the third project year ($)
1				
2				
3				
4				
5				
6				
7				
8				
	Yearly total			

程序指引重點 – 執行項目時限

- 機構應在獲撥款日期起計**六個月**內開展項目（批准信另有規定除外），並按**已訂時限**、獲批財政預算及人手完成項目

- 如在執行項目期間，發生任何可能導致項目無法如期完成的情況，機構須**立即通知基金會**

Appendix VI

BEAT DRUGS FUND ASSOCIATION

IMPLEMENTATION PLAN

(Grantee should wait for Beat Drugs Fund Association's confirmation of this plan before commencement of project. Once this plan is confirmed, prior approval shall be obtained from the Association in case a change in the implementation plan is required, say cancellation of a project activity or amendment to questionnaires.)

(A) Project reference no.: BDF1700

(B) Project title: _____

(C) Name of grantee: _____

(D) Amount of grant approved: _____

(E) Date of commencement:
(The commencement date stated here will be regarded as the start date of the first project year in part (N)) _____

(F) Expected date of completion: _____

程序指引重點 – 招聘員工

- 機構應透過公開公平的制度招聘員工
- 按獲批准的人手及薪酬水平作出聘任
- 在聘請員工的過程中，必須避免利益衝突

程序指引重點 – 採購貨品／服務

- 如採購貨品／服務的價值為**5千元**或以上，須按「程序指引」取得足夠數目的書面報價／標書
- 在採購的過程中，必須秉持公平原則及避免利益衝突

程序指引重點－採購貨品／服務

採購5千至5萬元的
貨品或服務

已上調

取得不少於**2個**
合符要求的書面報價

新安排

程序指引重點－採購貨品／服務

採購5萬元以上
至20萬元的貨品

已上調

採購5萬元以上
至50萬元的服務

取得不少於5個
合符要求的書面報價

程序指引重點－採購貨品／服務

已上調

採購20萬元以上的貨品

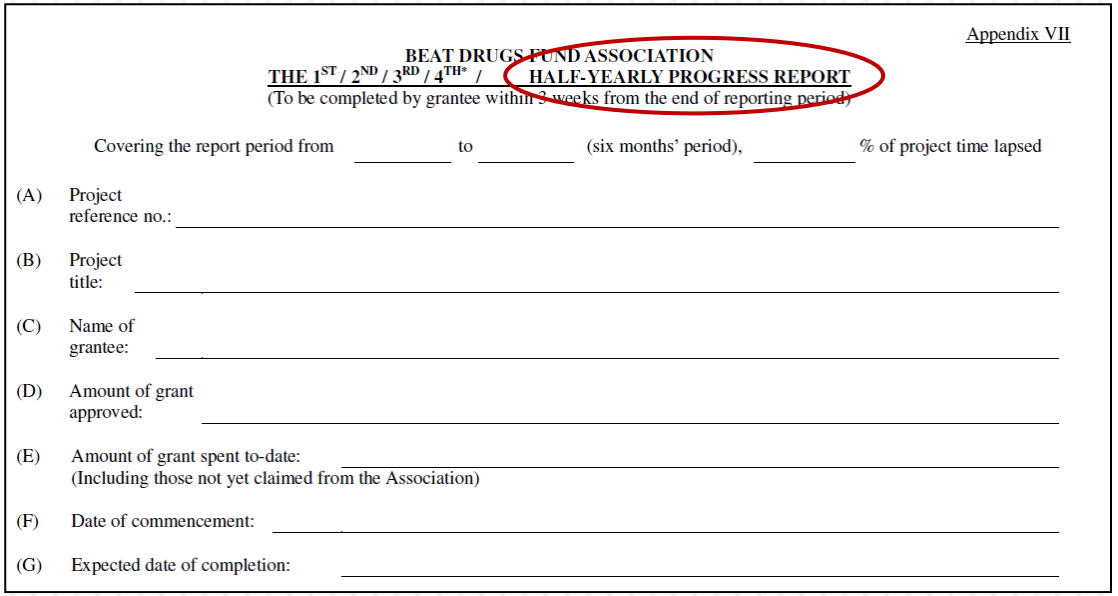
採購50萬元以上的服務

邀請不少於5份投標書

採納投標書可毋須徵求基金會批准；
惟機構須於完成投標程序後，隨即向基金會提交
所有投標書和**投標價格比較表**；
如不採納索價最低的投標書，須提供充足理據

程序指引重點 – 進度報告及詳盡報告

- 在推行項目期間，機構必須**每六個月**或其他指定時間提交**進度報告**，並按照既定的成果／成效指標交代項目進度
- 機構須在項目完成後兩個月內提交**詳盡報告**



Appendix VII

BEAT DRUGS FUND ASSOCIATION

THE 1ST / 2ND / 3RD / 4TH* / HALF-YEARLY PROGRESS REPORT

(To be completed by grantee within 3 weeks from the end of reporting period)

Covering the report period from _____ to _____ (six months' period), _____ % of project time lapsed

(A) Project reference no.: _____

(B) Project title: _____

(C) Name of grantee: _____

(D) Amount of grant approved: _____

(E) Amount of grant spent to-date: _____
(Including those not yet claimed from the Association)

(F) Date of commencement: _____

(G) Expected date of completion: _____

程序指引重點 – 會計記錄

- 機構須備存詳細的**會計記錄**和證明文件(例如**單據和發票**)，以證明款項如何運用及申請發還款項

- 須備存活動收入紀錄，
  於申請發還款項時把收入
  （包括利息收入）扣除

Anti-drug Pioneer Alliance

"Hong Kong Let's Beat Drugs" (3)-1

昌記食品公司
CHEONG KEE FOODS COMPANY

No. 1127

收 RECEIPT據

Received from Anti-drug Pioneer Alliance Date 8 July 2016

the sum of H. K. Dollars 玖佰陸拾元正

in payment of

H.K. $ 960

Felix

Felix Wong Tai Ho, Project leader

Alliance Anti-drug Pioneer

程序指引重點 – 購置資產

- 機構應備存**資產記錄冊**，記錄獲禁毒基金批准購置$1,000或以上的固定資產

已上調

- 在項目完成後，基金會有權要求機構把資產交還基金會

請注意批准信及財政預算內的細則

Beat Drugs Fund Regular Funding Scheme
"Project "
(Project reference no.: BDF1700)
Approved Budget

	Item	Amount Approved
1	Personal emolument[1]: 1 full-time Assistant Social Work Officer: $29,547 per month (first 12 months); $31,038 per month (subsequent 12 months); and MPF is included in all rates	$727,020.00
2	Publicity	$150,000.00
3	Preventive education activities *(after income)*	$100,000.00
4	Counselling materials and transportation	$50,000.00
5	External audit fee	$20,000.00
	Total	**$1,047,020.00**

Note: (1) The grantee shall observe the maximum headcount, employment period and salary approved for each job position. Annual increment may be granted only for the staff employed for the project with satisfactory continuous performance.

(2) Photocopiers and personal computers are not supported.

xx/17(MT) February 2018

程序指引重點 – 版權材料

- 因推行項目而製作或編寫的所有材料（包括研究報告、影音產品、手冊等）或其他類似材料的**擁有權、版權及其他一切知識產權，均屬基金會所有**
- 基金會可隨時使用上述材料作任何用途
- 如經基金會事先批准，獲撥款機構亦可使用上述材料作學術研究或其他有意義的用途

程序指引重點 – 監察及分享

- 基金會成員、禁毒常務委員會成員或禁毒處人員可不時進行**實地視察**，監察項目的進展
- 部份項目會由兩位禁毒常務委員會或其小組委員會成員(care-takers)監察
- 機構須在基金會舉辦的發布會／經驗分享會等活動提供協助，包括派員作經驗分享

19

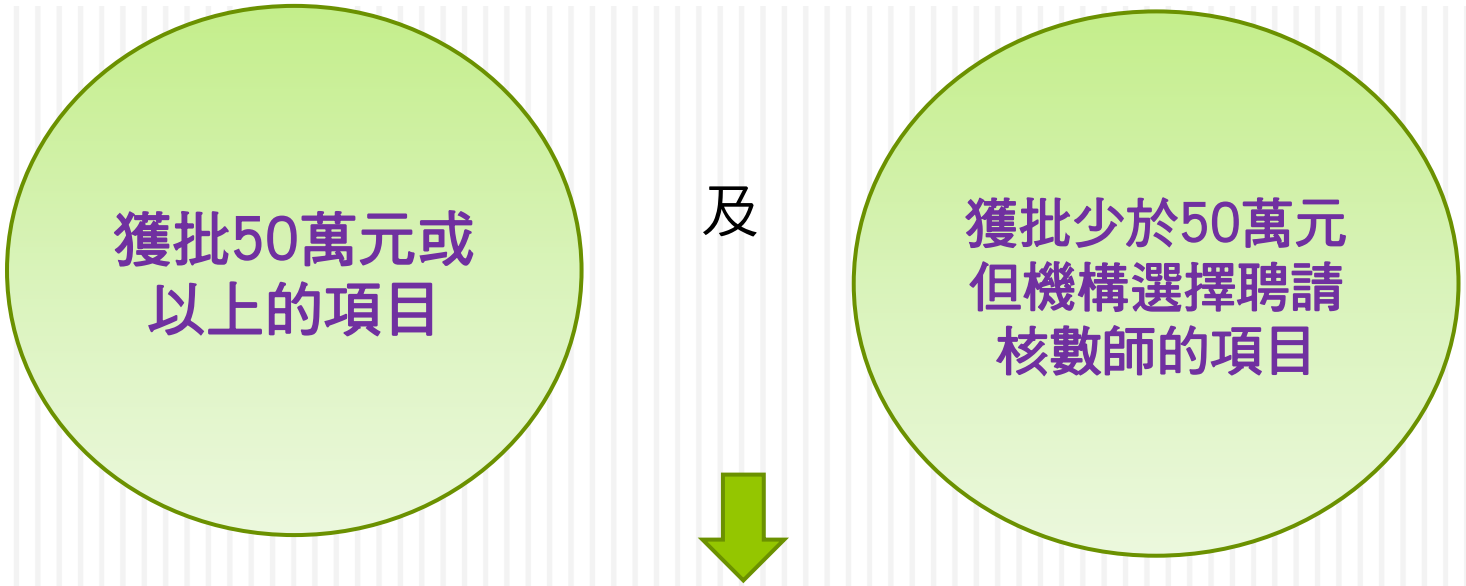
程序指引重點 – 鳴謝及贊助

- 機構須**向基金會鳴謝**，包括在所有有關宣傳品或刊物上作出適當鳴謝
- 項目如接受任何其他贊助，或以贊助者名字為項目命名，必須事先取得基金會書面批准

第二部分

發放款項流程

發放款項流程 – 分期發放模式



- ✓ 機構已獲額外撥款，以**外聘核數師**，
  進行年度及最終(涵蓋整段項目期間)的核數及核證
- ✓ 機構須開立及使用**專用銀行戶口**處理撥款
- ✓ 撥款將**分期**發放予機構

發放款項流程 – 分期發放模式

如項目為期少於18個月

獲發放首年度所需款額50%

首年度完結時
獲發放首年度款額餘下50%，及第二年度所需款額50%

獲發放最後一筆撥款（或向基金會退還尚未動用的撥款）

項目開始	首年度	第二年度	項目完結

獲撥款人／機構按時提交：

進度報告（每半年／季及按基金會秘書處要求）

年度「經審計帳目」

最終「經審計帳目」和詳盡報告（項目完結時）

發放款項流程 – 分期發放模式

新安排

如項目為期18個月或以上

項目開始	首年度	第二年度	其後年度	項目完結
獲發放首年度所需款額100%	首年度完結時獲發放第二年度所需款額50%	其後每年度完結時獲發放上一年度款額餘下50%，及下一年度所需款額50%	獲發放最後一筆撥款（或向基金會退還尚未動用的撥款）	
獲撥款人／機構按時提交：	進度報告（每半年／季及按基金會秘書處要求）	年度「經審計帳目」	最終「經審計帳目」和詳盡報告（項目完結時）	

審計費用（適用於分期發放模式）

- 因應核數及核證要求，獲撥款機構已獲批撥款，用以外聘核數師

獲批項目年期	聘用核數師的撥款額
1年或以下	8,000元
1年以上至2年	16,000元
2年以上	24,000元

發放款項流程 – 現金需求預測

	Item	Amount Approved	First Year Funding requirement	Second Year Funding requirement	Total
1	Personal emolument[1]: 1 full-time Assistant Social Work Officer: $29,547 per month (first 12 months); $31,038 per month (subsequent 12 months) MPF is included in all rates	$727,020.00	$354,564.00	$372,456.00	$727,020.00
2	Publicity	$150,000.00	$75,000.00	$75,000.00	$150,000.00
3	Preventive education activities (after income)	$100,000.00	$50,000.00	$50,000.00	$100,000.00
4	Counselling materials and transportation	$50,000.00	$25,000.00	$25,000.00	$50,000.00
5	External audit fee	$20,000.00	$10,000.00	$10,000.00	$20,000.00
	Total	**$1,047,020.00**	$514,564.00	$532,456.00	**$1,047,020.00**
			50%= $257,282.00	$266,228.00	

Note: (1) The grantee shall observe the maximum headcount, employment period and salary approved for each job position. Annual increment may be granted only for the staff employed for the project with satisfactory continuous performance.

(2) Photocopiers and personal computers are not supported.

發放款項流程 – 核數師報告

- 機構須**按年**及於**項目完成後**提交「經審計帳目」（audited account），內容包括：
  - ✓ 核數師報告（auditors’ report）
  - ✓ 收支表(statement of income and expenditure)
  - ✓ 財務狀況表（statement of financial position）
  - ✓ 帳目附註 (notes to account)
- 核數師報告須述明機構已符合基金會訂明的撥款條件

發放款項流程 – 禁毒基金財務表格

- 收入及支出細項表 (I&E Form)
- 薪酬記錄 (Form B)
- 交通支出表格 (Form A)

收入及支出細項表

Appendix IX

禁毒基金會 Beat Drugs Fund Association

由撥款人/機構填寫的收入及支出細項表 Particulars of Income and Expenditure Items to be Completed by Grantee

計劃編號 Project No. : 159999

獲撥款人/機構名稱 Name of grantee : Anti-drug Pioneer Alliance

計劃名稱 : Name of project: Hong Kong Let's Beat Drugs

29

注意 (1)所有適用的欄均應填寫 All the required information in all applicable columns should be filled in.
Note: (2)填寫本表前應先參閱相關的說明 Guidance notes to completion of this form should be read before completing this form.

獲批准項目名稱 Name of approved cost item (A)	單據編號Receipt serial number (B)	單據日期 Date of receipt (C)	款項用途，物件/服務/膳食的資料和對應活動的日期 Purpose of expense, description of the programme materials purchased/service obtained/meals served and date of activity (D)	供應商名稱 Name of vendor (E)	受惠人數 No. of beneficiaries (F)	數量 Quantity purchased (G)	支出/(收入) Expense / (Income) (H)	用款前已取得足夠數量而符合要求的報價(如適用) Sufficient no. of quotations obtained before procurement (if applicable) (NA/Y/N) (K)	不採納最低報價/沒有足夠報價的理由 Justification for not accepting the lowest offer, or insufficient no. of quotations is obtained (L)
Personal Emolument	(1)-1	2017/05/31	ASWO, Lui Ka Ho	--	--	12 months	$354,564.00	--	--
Personal Emolument						**Sub-total**	**$354,564.00**		
Publicity	(2)-1	2016/06/13	Logo, Banner and Posters	Link2Sight Design Co.	--	1 logo, 15 banners and 500 posters	$5,440.00	Y	N/A, lowest offer accepted
	(2)-2	2016/06/13	Colour posters	Good View Colour Laser Copy Centre	--	10	$35.00	N/A	
	(2)-3	2016/06/17	Stamps	7-Eleven	--	20	$34.00	N/A	
	(2)-4	2016/06/18	Badges	Pak Ko Ind. Comp.	750	750	$1,725.00	N/A	
Publicity						**Sub-total**	**$7,234.00**		
Preventive education activities	(3)-1	2016/07/08	mini packs of chocolate	Cheong Kee Food Company	80	80 packs	$960.00	N/A	
	(3)-2	2016/07/22	Stationery	Hoi Kee Book Store	50	-	$300.00	N/A	
	...	...	...	...	...	...	...	...	
	(3)-43	2016/07/23	Fee collected from ABC小學	ABC小學	--	-	($500.00)	N/A	
	(3)-44	2016/07/25	Fee collected from DEF紀念小學	DEF紀念小學	--	-	($500.00)	N/A	
Preventive education activities						**Sub-total**	**$84,326.10**		
Counselling materials and transportation	Form A-Lui Ka Ho (June)	2016/06/28	Transportation	N/A	N/A	N/A	$85.10	N/A	
	...	...	...	...	...	...	...	...	
	(4)-9	2016/10/16	Hire of coach to visit DIC	Jackson Coach Hire Service Ltd.	20	1 job	$1,000.00	N/A	
Counselling materials and transportation						**Sub-total**	**$3,589.50**		
External Audit Fee	(5)-1	2017/06/03	Audit for first project year	United Partners CPA Ltd.	N/A	1 job	$5,000.00	N/A	
External Audit Fee						**Sub-total**	**$5,000.00**		
						總數Total	**$454,713.60**		

本人茲證明 We certify that-

(1)本人確定所有資料均真確無誤，而所有費用均用於禁毒基金會已批准的用途，

(2)本人確定購物/僱用服務/提供膳食均為必需，及符合計劃實際需要，

(1)We confirm that the information provided above is true and correct and all expenses were incurred under purposes approved by the Beat Drugs Fund Association.

(2)We confirm that the materials purchased/services hired/meals provided are essential for meeting the actual project requirement.

收入及支出細項表

Appendix IX

(3)We confirm that procedural guidelines and conditions of grants issued by the Beat Drugs Fund Association have been strictly followed when incurring project expenses.

(4)本人/我們在採購/僱用服務/用膳時，已盡所有能力，確保根據公平競爭的原則採購物品及服務、採購過程具透明度，而所採購的物品及服務是合符經濟原則的。

(4)We are satisfied that in the procurement/hire of service/provision of meals, goods, services and meals are purchased in a competitive and equitable way, the process is transparent, and the purchases represent value for money.

(5)本人/我們確認已妥當地分攤開支(若有的話)，而有關分攤的開支是直接用於計劃。

(5) We confirm that reasonable apportionment of expenses, if any, has been made and the apportioned expenses are directly related to the project.

日期Date: 4/6/2017

計劃主管姓名，職銜及簽名
Name, title and signature of the project-in-charge: Felix Wong Tai Ho, Project leader

日期Date: 13/6/2017

獲撥款人/機構高級職員的姓名，職銜及簽名
Name, title and signature of senior officer of the grantee: Elaine Chan Mei Kuen, Director

機構蓋章
Official seal:
Official chop:

填寫表格的說明 Guidance Notes to Completion of the Form

(1)程序物資包括已包裝食/飲品、文儀用品、現金卷/書卷、禮品等物件；通常這些物件已現成可用，無需加工。例如：購買小食、紙張、小禮物、郵票。

(1) Programme materials include pre-packed food/drinks, stationery, coupons, gifts. Usually these materials are ready-made for immediate deployment. Examples: snacks, paper, small gifts, stamps

(2)僱用服務包括設計及印刷、影印、網上服務、導師費、講員費、場地費用、租用旅遊巴、租用器材、承包商服務、訂製的物件。例如速遞服務、輸出海報、興趣班導師、醫生費用。

(2) Services include design and printing, photocopying, online services, instructor fee, speaker fee, venue expenses, hire of coach and lorry, equipment rental, contractor service, production of custom-made items. Examples: courier service, production of publicity materials, interest-class instructor fee, doctor's fee.

(3)每行以一張單據為準。即使一張單據包括多個項目，亦只佔一行。

(3) Each receipt should occupy one line, even if the receipt contains multiple items.

(4)同一獲批准項目下的開支細項應以一組按年列出。請不要按月列出開支。

(4) All expenditure items in a project year under the same approved cost item should be grouped together in a single list. Please do not use separate list for each month.

(5)向參加者徵收的費用，應以獨立一項列明，撥入對應的獲批准項目。如有收費收據，亦應連同其他單據一同提交。

(5) Income collected from participants should be indicated in a separate row and marked under corresponding approved cost item. Income receipts should be submitted if available.

(6)計劃主管或獲撥款人/機構高級職員應在單據上逐一簽署作實。

(6) The project in-charge or the senior officer of the grantee should sign each receipt for certification.

(7)若涉及交通開支(僱用服務如租用旅行車等除外)，請同時遞交表格A；員工開支則須同時遞交表格B。

(7) Please also submit the completed Form A if travelling expenses (excluding hiring of services such as rental of coaches, etc) are involved; and Form B if staff costs are involved.

(8)如向參加者派任何面額的現金卷/書卷，必須保留分發名單記錄。

(8) A record on the distribution of the cash coupons of any value to participants should be maintained.

備註 Remarks:

(A)根據禁毒基金發出的通知書上的「獲批准項目」名稱，填寫對應的名稱。

(A) The name of the approved cost item as indicated on the notification of successful grant application should be marked in the column.

(B)為每張單據編號，以便對應。

(B) Each receipt should be serially numbered for cross-checking.

(D)簡略介紹物件/服務/膳食的資料。如文具等未有指定內容的項目，應加上詳情。如物品/服務/膳食是針對某一活動而設，該活動的名稱及日期亦應填寫。

(D) Briefly describe the items purchased/service hire/meal provided. For vague items such as "stationery", details should be specified. The name and date of the activity should be indicated as well if the purchase/service/meal is specially designated for one activity.

(F)膳食/茶點單據應寫上用膳人數，分別列明工作人員、義工和參加者的人數。如物件作派發用途，應寫上接受物件的人數。

(F) The number of staff members, volunteers and participants should be separately indicated for meals/refreshment served. If the purchase was/will be distributed, the number of people receiving the items should be marked.

(G)如單據上包括多個項目，而各項目對應的數量亦已清楚顯明於單據上，可略去不寫。

(G) If the receipt relates to multiple different items and the individual quantities have been clearly marked in the receipt, the quantities may be omitted.

(H)填上每一張單據的總額。

(H) The total for each receipt should be marked.

(K)每次採購(即件數乘以單價，或各項目價格的總和)價值$5,000或以上的物件、僱用服務或用膳前，應按禁毒基金的指引取得足夠數量而符合要求的報價/投標。獲撥款人/機構應妥善記錄報價資料，以便禁毒基金會作隨時的檢查。至於招標記錄則應在確定招標記錄後隨即遞交至禁毒基金會。

(K) Sufficient number of quotations with conforming offers/tenders should be obtained for a single purchase (i.e. no. of units x unit price) or purchases of a list of items costing $5,000 or above in accordance with Beat Drugs Fund Guidelines before proceeding with the purchase. Quotation records should be duly prepared and readily available for Beat Drugs Fund Association's inspection upon request. Tender documents should be submitted to Beat Drugs Fund Association once the tender is awarded.

(rev. February 2018)

薪酬記錄

禁毒基金會 Beat Drugs Fund Association

薪酬記錄 Records of Personal Emoluments **(1)-1** **FORM B**

計劃編號 Project No. : 159999 | 獲撥款人/機構名稱 Name of grantee : Anti-drug Pioneer Alliance | 計劃名稱 Name of project: Hong Kong Let's Beat Drugs

注意 (1)所有適用的欄均應填寫。Fill in the required information in all applicable columns.
Note: (2)填寫本表前應先參閱相關的說明。Guidance notes to completion of this form should be read before marking this form.

31

月薪制的員工Monthly paid staff

職銜 Rank of staff (A)	獲批准的月薪水平(連同強積金) Monthly claim limit (incl. MPF) (B)	剩餘的獲批准的聘用時限(按月計) Remaining balance of approved employment period (in months) (C)	員工姓名 Name of staff (D)	員工實收的月薪 (連強積金) Actual Monthly salary (incl. MPF) (E)	申領薪金的期間 Salary period claimed (F)	期間內的薪金 Salary for the period (G)	因早前出現的調整而現時申請補領/退回的薪金(如有) Additional claim/refund due to adjustment from previous months (if applicable) (H)	實際向禁毒基金申領的金額 **(請參閱說明(2)及(3))** Actual Amount of Claim from BDF **(See Notes (2) & (3))** (I)=(G)+(H)	剩下還可申領薪金的時限(按月計) Remaining period that can be claimed (in months) (J)=(C)-(F)	僱員簽署 Signature of staff (K)
Assistant Social Work Officer	$29,547.00	24	Lui Ka Ho	$29,547.00	1 Jun 2016 - 31 May 2017	$354,564.00	0	$354,564.00	12.00	Lui
							月薪和Sub-total for monthly paid staff	**$354,564.00**		
							獲批准的總薪金Approved staff cost	$727,020.00		

時薪制的員工Hourly rated staff

職銜 Rank of staff (L)	獲批准的時薪水平(連同強積金) Hourly Rate (incl. MPF) approved (M)	剩餘的獲批准的聘用時限(按小時計) Remaining balance of approved employment period (in hours) (N)	員工姓名 Name of staff (O)	員工實收的時薪 Actual hourly rate (incl. MPF) (P)	申領薪金的期間 Salary period claimed (Q)	期間內的實際工時 Actual number of working hours in the period (R)	實際工時包括休息/用膳時間(是/否) Actual number of working hours including rest/meal time (Yes/No) (S)	期間內的薪金 Salary for the period (T)=(P)x(R)	因早前出現的調整而現時申請補領/退回的薪金(如有) Additional claim/refund due to adjustment from previous months(if applicable) (U)	實際向禁毒基金申領的金額 **(請參閱說明(2)及(3))** Actual Amount of Claim from BDF **(See Notes (2) & (3))** (V)=(T)+(U)	剩下還可申領薪金的時限(按小時計) Remaining no. of hours that can be claimed (W)=(N)-(R)	僱員簽署 Signature of staff (X)
								時薪和Sub-total for hourly rated staff		$0.00		
								獲批准的總薪金Approved staff cost				

本人茲證明 We certify that-

(1)本人確定所有資料均真確無誤。
(1) We confirm that the information provided above is true and correct.

(2)本人確定表格上列出的員工於列明的時段內曾為本計劃獲批准的範疇工作，期間他們沒有計劃範疇以外的職責。
(2) We confirm the staff on list had been working on the approved scopes of the Beat Drugs Fund project in the stated period and during the stated period they were not deployed to other duties beyond the scope of the project.

(3)本人確定向禁毒基金匯報及申領的薪金，已全數發放給員工，並沒有扣除任何金額。
(3) We confirm that the personal emolument reported to and claimed from Beat Drugs Fund is fully disbursed to the staff concerned with no amount withheld or deducted whatsoever.

日期Date: 31/5/2017
計劃主管的姓名，職銜及簽名 Name, title and signature of the project-in-charge: Felix Wong Tai Ho, Project leader Felix

日期Date: 3/6/2017
獲撥款人/機構高級職員的姓名，職銜及簽名 Name, title and signature of senior officer of the grantee: Elaine Chan Mei Kuen, Director E Chan

機構蓋章 Official seal: Anti-drug Pioneer Alliance Volunteer

填寫表格的說明 Guidance Notes to Completion of the Form

(1)此表格記錄月薪及時薪制的僱員薪酬資料。如計劃所涉及人員並非獲撥款人／機構招聘的僱員，或該人員以完成每項工作的形式支取收入的話，應以「僱用服務」的形式於「由撥款人/機構填寫的收入及支出細項表」記錄這等資料。
(1) This form records the personal emoluments of monthly-paid and hourly-rated staff. Project personnel who are not the grantee's employees or are paid upon completion of jobs should be recorded as "hire of service" in the "Particulars of income and expenditure item" form.

交通支出表格

禁毒基金會 Beat Drugs Fund Association

申領發還交通支出表格 Claim Form for Travelling Expenses

FORM A

申領人姓名Claimant's name:	Lui Ka Ho	申領人職銜 Claimant's post title:	Project Officer
計劃編號 Project No. :	159999	獲撥款人/機構名稱 Name of grantee :	Anti-drug Pioneer Alliance

若路程包括往返居所，則須填寫居所地址(只需地區及街名)
If home-office journey is involved, the claimant's home address should be provided (district and street name only)

居所地址Home address:	Kai Tin Road, Lam Tin		
申領發還款項總額 Total amount claimed	**$85.10**	交通支出是從右方的項目支付： The travelling expenses should be deducted from :	Travel Expenses (獲批准項目名稱) (name of approved cost item)

第一部份 (由申領人填寫)
Section I (to be completed by claimant)

行程記錄 Records of journeys

日期 Date	由 Origin	至 Destination	使用的交通工具(包括巴士和小巴路線號碼) Mode of transport used (incl. route no. of bus and minibus)	交通費 Travelling expenses: 的士費 Taxi fare (a)	交通費 Travelling expenses: 其他 Other expenses (b)	扣除平日往返居所的交通費用 Deduction for normal home-office journey (c)	申領發還款項 Actual amount claimed for the journey (a)+(b)-(c)	行程目的 Purpose of journey	乘搭的士的理由及乘客人數 Justification for use of taxi and number of passengers
2016-06-18	Wong Tai Sin (Office)	Cheung Sha Wan	MTR		5.5	0	5.5	School programme	--
2016-06-18	Cheung Sha Wan	Wong Tai Sin (Office)	MTR		5.5	0	5.5	School programme	--
2016-06-19	Wong Tai Sin (Office)	Cheung Sha Wan	Bus No. 2F		5	0	5	School programme	--
2016-06-19	Cheung Sha Wan	Lam Tin	MTR		6.7	5.5	1.2	Return home after programme	--
2016-06-23	Diamond Hill	Wong Tai Sin (Office)	Taxi	19.5		0	19.5	Return to office after school programme	Travelling with 3 volunteers. Materials were very heavy; it was cheaper to ride a taxi than using public transportation.
2016-06-24	Wong Tai Sin (Office)	Tin Yiu Estate	Bus No. 2B + 69X		4.2+13.3	0	17.5	School programme	--
2016-06-24	Tin Yiu Estate	Wong Tai Sin (Office)	Bus No. 69X + 2B		13.3+4.2	0	17.5	Return to office after programme	--
2016-06-29	Lam Tin	Cheung Sha Wan	MTR		6.7	Not applicable (non-workday)	6.7	School programme	--
2016-06-29	Cheung Sha Wan	Lam Tin	MTR		6.7	Not applicable (non-workday)	6.7	School programme	--
					申領發還款項總額 Total amount claimed		**$85.10**		

注意Note:

(1)乘搭公共交通工具及的士的行程記錄應寫在此表格。租用輕型客貨車、旅遊巴或貨車的資料不應記錄於此。的士的單據應隨本表格一同提交。
(2)獲撥款人應在節省開支及提高效率的前提下採用最合適的交通工具。
(3)在行程中乘坐的士，應嚴加管制。申領人應事先取得上司的批准，才乘搭的士。申領人上司在批准屬員因執行職務而乘坐的士之前，必須有充分理由確信當時並無較廉宜或合適的交通工具。申領人在申請發還的士費時，必須提出理由，說明為何乘坐的士而不採用其他交通工具。
(4)申領人往返居所和工作地點之間的行程所支付的交通費，通常不可獲全數發還，而須扣除申領人平日往返居所的交通費。如因特殊情況(例如行程是在非工作日作出)並無扣除相關費用，必須詳述理由。

(1)Records of journeys for use of public transports and taxis should be marked in this form. The hire of coaches, light goods vehicles or lorries for transportation of group of passengers or items in bulk should NOT be recorded in this form. Receipts of taxis should be submitted together
(2)The most appropriate method of conveyance in the interest of economy and efficiency should be used.
(3)The use of taxis should be strictly controlled. The claimant should have obtained prior approval before use of taxi. The claimant's supervisor must be fully satisfied that a more economical mode of transport is not available or appropriate before approving the use of taxis for duty purposes. Accordingly, claimants are required to explain in their claims for reimbursement of taxi fares the reasons for using taxis instead of other modes of transport.
(4)Travelling expenses incurred on journeys between the claimant's home and places of work are normally not reimbursable in full. Deductions should be made based on the expenses for a normal home-office journey of the claimant. If no deduction is made in exceptional circumstances (e.g. journeys taken on non-working days), full justifications must be provided.

交通支出表格

本人茲證明 I certify that

(1)本人因獲禁毒基金批准的項目而行走有行程記錄表所示的所有路程，並已在所示的日期支付合關的交通費用。

(2)(如適用)乘坐的士是因為無其他較廉宜或較合適的交通工具可供乘搭。乘搭的士的理由是充分和正確無誤。

(1) I have taken all journeys shown on the record of journeys for Beat Drugs Fund-approved purposes and paid for the travelling expenses so incurred on the dates indicated.

(2) (If applicable) Taxi was used because there was no other cheaper/suitable method of conveyance available. Detailed justifications provided are full, true and correct.

本人謹此聲明，在本申領表上填報的資料均真確無誤。 I declare that the information provided in this claim is true and correct.

日期Date:	2016-Jul-02	申領人簽名 Signature of claimant:	*Lui*

第二部份 (由申領人上司或獲撥款人/機構高級職員填寫)
Section II (to be completed by the claimant's supervisor/senior officer of the grantee)

本人茲證明 I certify that

(1)本人確定第一部分的所有資料均真確無誤。

(2)本人確定申領人已在節省開支及提高效率的前提下採用最合適的交通工具。

(3)(如適用)申領人乘坐的士前已得到事先批准，乘坐的士是因為無其他較廉宜或較合適的交通工具可供乘搭。

(4)本人認為已對交通支出嚴加管制和提出申領支出的理由是非常充分的。

(5)本人明白獲發還交通支出的條件，即任何多付給申領人的款項可悉數向獲撥款人/機構討回。

(1) I confirm that the information provided in Section I above is true and correct.

(2) I confirm that the claimant has used the most appropriate method of conveyance in the interest of economy and efficiency.

(3) (If applicable) Prior approval on use of taxi has been obtained. Taxi was used because there was no other cheaper/suitable method of conveyance available.

(4) I am satisfied that claim of travelling expenses is strictly controlled and fully justified.

(5) I acknowledge that the travelling expenses are reimbursed on the condition that any overpayment is recoverable in full.

日期Date:	2016-Jul-03	申領人上司或獲撥款人/機構高級職員簽名 Signature of claimant's supervisor/senior officer of the grantee:	*Felix* Felix Wong Tai Ho, Project leader	機構蓋章 Official seal:	Anti-drug Pioneer Alliance

---

個人資料私隱聲明Personal Data Privacy Statement:

申領人所提供的資料，將用於處理發還交通費及其他相關事的用途。禁毒基金會人員、各政策局局長、部門首長及／或獲指派負責處理款項及有關事宜的人員，可能會得知這些資料。根據《個人資料（私隱）條例》，申領人有權查閱和更正所提供的個人資料。
The information provided by the claimant will be used for processing reimbursement of travelling expenses and other related purposes. The information provided may be disclosed to members of the Beat Drugs Fund Association, Heads of Bureau/Department and/or their designated officers who are required to handle claims of the Beat Drugs Fund Association and other related matters. Claimants have a right of access and correction with respect to personal data as provided for in the Personal Data (Privacy) Ordinance.

(rev. February 2018)

發放款項流程 – 其他財務文件

Name of Grantee: _____

Project Title/ No.: _____ (BDF _____)

Project Year : 1st/ 2nd/ 3rd Year* from _____(dd/mmyy) to _____ (dd/mm/yy)

*(*Pls circle the ordinal number of year as appropriate. One Checklist is to be used for each project year.)*

Beat Drugs Fund (BDF) Regular Funding Exercise
Checklist for financial documents to be submitted by grantee for disbursement of grants
(For projects engaging auditors for auditing and assurance)

Please read carefully the "Procedural Guidelines for Successful Applicants" (Procedural Guidelines) and the terms and conditions as stipulated in the approval letter and the approved budget for the project issued by the Beat Drugs Fund Association (BDFA) before filling in this Checklist.

(I) Submission of financial documents[1]	Please put a "√" if the document is submitted together with this checklist	(For Official Use) Date of submission	Remarks	Officer's Initial
(a) Annual audited account and auditor's report[2] for the project year / Final audited account and auditor's report[2] covering the whole project duration for final payment				
(b) Photocopy of the project bank account passbook or record of sub-ledger account				
(c) Completed forms of -				
(i) "Particulars of Income and Expenditure Items" (Appendix IX)				
(ii) "Claim for Travel Expenses" (Form *A, if applicable)*				
(iii) "Records of Personal Emolument" (Form B, *if applicable)*, together with the salary statement/payroll records of project staff, signed by project-in-charge or a senior officer				
(d) Original receipts, payment vouchers and other documents substantiating the nature and the amount of expenditure and transactions, certified by project-in-charge or a senior officer				
(e) Tender/quotation records[3] and/or coupon distribution records (*if applicable)*				
(f) Other financial documents as required in the approval letter and/or approved budget (*please specify if applicable:*_____)				
(g) For final payment, additional submission of the following -				
(i) Register of assets (*if applicable; please state "N/A" if not applicable*)				
(ii) Copies of deliverables (*if not already submitted*)				

發放款項流程 – 其他財務文件

Name of Grantee: . . . . . .

Project Title/ No.: . . . . . (BDF _____)

Project Year : 1st/ 2nd/ 3rd Year* from . . . . . (dd/mm/yy) to _____ . . . . . (dd/mm/yy)

(Please tick the ordinal number of year as appropriate. One Checklist is to be used for each project year.)

Beat Drugs Fund (BDF) Regular Funding Exercise

Checklist for financial documents to be submitted by grantee for disbursement of grants

(For projects engaging auditors for auditing and assurance)

Please read carefully the "Procedural Guidelines for Successful Applicants" (Procedural Guidelines) and the terms and conditions as stipulated in the approval letter and the approved budget for the project issued by the Beat Drugs Fund Association (BDFA) before filling in this Checklist.

(I) Submission of financial documents[1]	Please put a "√" if the document is submitted together with this checklist	(For Official Use) Date of submission	Remarks	Officer's Initial
(a) Annual audited account and auditor's report[2] for the project year / Final audited account and auditor's report[2] covering the whole project duration for final payment				
(b) Photocopy of the project bank account passbook or record of sub-ledger account				
(c) Completed forms of -				
(d) Original receipts, payment vouchers and other documents substantiating the nature and the amount of expenditure and transactions, certified by project-in-charge or a senior officer				
(e) Tender/quotation records[3] and/or coupon distribution records (*if applicable*)				
(f) Other financial documents as required in the approval letter and/or approved budget (*please specify if applicable*: _____)				
(g) For final payment, additional submission of the following -				
(i) Register of assets (*if applicable; please state "N/A" if not applicable*)				
(ii) Copies of deliverables (*if not already submitted*)				

(b) Photocopy of the project bank account passbook or record of sub-ledger account

發放款項流程 – 其他財務文件

Name of Grantee: . . . . . .

Project Title/ No.: . . . . . (BDF _____)

Project Year : 1st/ 2nd/ 3rd Year* from . . . . . (dd/mm/yy) to _____ . . . . . (dd/mm/yy)

*(Please circle the ordinal number of year as appropriate. One Checklist is to be used for each project year)

Beat Drugs Fund (BDF) Regular Funding Exercise

Checklist for financial documents to be submitted by grantee for disbursement of grants

(For projects engaging auditors for auditing and assurance)

Please read carefully the "Procedural Guidelines for Successful Applicants" (Procedural Guidelines) and the terms and conditions as stipulated in the approval letter and the approved budget for the project issued by the Beat Drugs Fund Association (BDFA) before filling in this Checklist.

(I) Submission of financial documents[1]	Please put a "√" if the document is submitted together with this checklist	(For Official Use) Date of submission	Remarks	Officer's Initial
(a) Annual audited account and auditor's report[2] for the project year / Final audited account				
(b) "Claim for Travel Expenses" (Form A, *if applicable*)				
(c) "Records of Personal Emolument" (Form B, *if applicable*), together with the salary statement/payroll records of project staff, signed by project-in-charge or a senior officer				
(d) Original receipts, payment vouchers and other documents substantiating the nature and the amount of expenditure and transactions, certified by project-in-charge or a senior officer				
(e) Tender/quotation records[3] and/or coupon distribution records (*if applicable*)				
(f) Other financial documents as required in the approval letter and/or approved budget (*please specify if applicable*: _____)				
(g) For final payment, additional submission of the following -				
(i) Register of assets (*if applicable, please state "N/A" if not applicable*)				
(ii) Copies of deliverables (*if not already submitted*)				

(d) Original receipts, payment vouchers and other documents substantiating the nature and the amount of expenditure and transactions, certified by project-in-charge or a senior officer

發放款項流程 – 其他財務文件

Name of Grantee: . . . . . .

Project Title/ No.: . . . . . (BDF _____)

Project Year : 1st/ 2nd/ 3rd Year* from . . . . . (dd/mm/yy) to _____ . . . . . (dd/mm/yy)

(Please tick the ordinal number of year as appropriate. One Checklist is to be used for each project year.)

Beat Drugs Fund (BDF) Regular Funding Exercise

Checklist for financial documents to be submitted by grantee for disbursement of grants

(For projects engaging auditors for auditing and assurance)

Please read carefully the "Procedural Guidelines for Successful Applicants" (Procedural Guidelines) and the terms and conditions as stipulated in the approval letter and the approved budget for the project issued by the Beat Drugs Fund Association (BDFA) before filling in this Checklist.

(I) Submission of financial documents[1]	Please put a "√" if the document is submitted together with this checklist	(For Official Use) Date of submission	Remarks	Officer's Initial
(a) Annual audited account and auditor's report[2] for the project year / Final audited account and auditor's report[2] covering the whole project duration for final payment				
(b) [illegible]				
(c) (i) "Claim for Travel Expenses" (Form A, *if applicable*)				
(ii) "Records of Personal Emolument" (Form B, *if applicable*), together with the salary statement/payroll records of project staff, signed by project-in-charge or a senior officer				
(d) Original receipts, payment vouchers and other documents substantiating the nature and the amount of expenditure and transactions, certified by project-in-charge or a senior officer				
(e) Tender/quotation records[3] and/or coupon distribution records (*if applicable*)				
(f) Other financial documents as required in the approval letter and/or approved budget (*please specify if applicable*: _____)				
(g) For final payment, additional submission of the following -				
(i) Register of assets (*if applicable; please state "N/A" if not applicable*)				
(ii) Copies of deliverables (*if not already submitted*)				

(e) Tender/quotation records[3] and/or coupon distribution records (*if applicable*)

發放款項流程 – 其他財務文件

Name of Grantee: . . . . . .

Project Title/ No.: . . . . . (BDF _____)

Project Year : 1st/ 2nd/ 3rd Year* from . . . . . (dd/mm/yy) to _____ . . . . . (dd/mm/yy)

(Please tick the ordinal number of year as appropriate. One Checklist is to be used for each project year.)

Beat Drugs Fund (BDF) Regular Funding Exercise

Checklist for financial documents to be submitted by grantee for disbursement of grants

(For projects engaging auditors for auditing and assurance)

Please read carefully the "Procedural Guidelines for Successful Applicants" (Procedural Guidelines) and the terms and conditions as stipulated in the approval letter and the approved budget for the project issued by the Beat Drugs Fund Association (BDFA) before filling in this Checklist.

(I) Submission of financial documents[1]	Please put a "√" if the document is submitted together with this checklist	(For Official Use) Date of submission	Remarks	Officer's Initial
(a) Annual audited account and auditor's report[2] for the project year / Final audited account and auditor's report[2] covering the whole project duration for final payment				
(b) (i) Register of assets (*if applicable; please state "N/A" if not applicable*)				
(ii) "Claim for Travel Expenses" (Form A, *if applicable*)				
(iii) "Records of Personal Emolument" (Form B, *if applicable*) together with the salary statement/payroll records of project staff, signed by project-in-charge or a senior officer				
(c) Original receipts, payment vouchers and other documents substantiating the nature and the amount of expenditure and transactions, certified by project-in-charge or a senior officer				
(d) Tender/quotation records[3] and/or coupon distribution records (*if applicable*)				
(e) Other financial documents as required in the approval letter and/or approved budget (*please specify if applicable*: _____)				
(f) For final payment, additional submission of the following -				
(i) Register of assets (*if applicable; please state "N/A" if not applicable*)				
(ii) Copies of deliverables (*if not already submitted*)				

發放款項流程 – 其他財務文件

Name of Grantee: . . . . . .

Project Title/ No.: . . . . . (BDF _____)

Project Year : 1st/ 2nd/ 3rd Year* from . . . . . (dd/mm/yy) to _____ . . . . . (dd/mm/yy)

*(Please tick the ordinal number of year as appropriate. One Checklist is to be used for each project year.)

Beat Drugs Fund (BDF) Regular Funding Exercise

Checklist for financial documents to be submitted by grantee for disbursement of grants

(For projects engaging auditors for auditing and assurance)

Please read carefully the "Procedural Guidelines for Successful Applicants" (Procedural Guidelines) and the terms and conditions as stipulated in the approval letter and the approved budget for the project issued by the Beat Drugs Fund Association (BDFA) before filling in this Checklist.

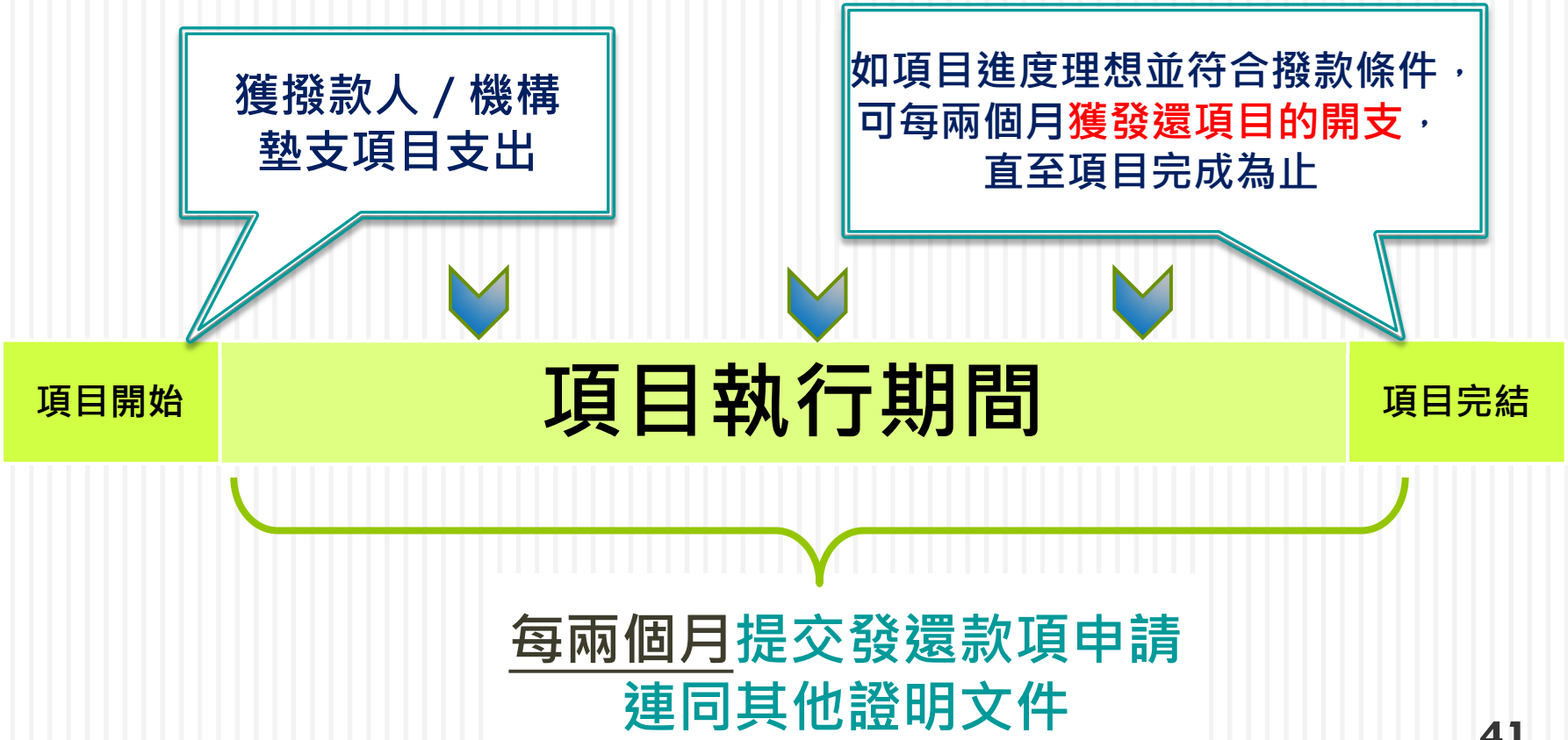
(I) Submission of financial documents[1]	Please put a "√" if the document is submitted together with this checklist	(For Official Use) Date of submission	Remarks	Officer's Initial
(a) Annual audited account and auditor's report* for the project year / Final audited account and auditor's report* covering the whole project duration for final payment				
(b) Photocopy of the pr				
(c) Completed forms of				
(i) "Particulars of Income and Expenditure Items" (Appendix IX)				
(ii) "Claim for Travel Expenses" (Form A, *if applicable*)				
(iii) "Records of Personal Emolument" (Form B, *if applicable*), together with the salary statement/payroll records of project staff, signed by project-in-charge or a senior officer				
(d) Original receipts, payment vouchers and other documents substantiating the nature and the amount of expenditure and transactions, certified by project-in-charge or a senior officer				
(e) Tender/quotation records* and/or coupon distribution records (*if applicable*)				
(f) Other financial documents as required in the approval letter and/or approved budget (*please specify if applicable*)* _____				
(g) For final payment, additional submission of the following -				
(i) Register of assets (*if applicable; please state "N/A" if not applicable*)				
(ii) Copies of deliverables (*if not already submitted*)				

(ii) Copies of deliverables (*if not already submitted*)

發放款項流程－發還款項模式

機構可選擇「實報實銷」還款方式

撥款程序 - 發還款項模式


獲撥款人 / 機構
墊支項目支出
如項目進度理想並符合撥款條件，
可每兩個月獲發還項目的開支，
直至項目完成為止
項目開始
項目執行期間
項目完結
每兩個月提交發還款項申請
連同其他證明文件

發放款項流程 – 發還款項申請表

BEAT DRUGS FUND
禁毒基金

Annex I

Section 1 : DETAILS OF APPROVED GRANT
第 一 節 批 准 撥 款 詳 情

From : Beat Drugs Fund Association
由 禁毒基金會

To : Grantee name: Anti-drug Pioneer Alliance
致 獲撥款人/機構

Project No. : 159999
計劃編號

Project Title : Hong Kong Let's Beat Drugs
計劃名稱

Date of approval of grant : 29 February 2017
批准撥款日期

Funds from the Beat Drugs Fund have been granted for the following purposes -
禁毒基金撥款予閣下/貴機構作下列用途 —

Item No. 編 號	Approved item 獲 批 准 項 目	Approved Amount ($) 批准撥款額 ($)
(1)	Personal emolument	$144,000.00
(2)	Publicity	$50,000.00
(3)	Preventive education activities *(after income)*	$60,000.00
(4)	Transportation	$5,000.00
	Total 總 數 :	**$259,000.00**

Date: 29 Feb. 2017 日期
Signature: 簽署
(Miss ABC)
for Beat Drugs Fund Association
禁毒基金會

F21

Section 2 : CLAIM
第二節 申請撥款

This ☐* is ☑* is not the final claim.
此次 是 不是最後一次申領撥款。

Balance of unclaimed grant at the time of submitting this form:
在遞交表格時仍未申領的撥款餘數為 $46,890

Please arrange for the reimbursement/payment of $43,422.70 as detailed below -
請安排發還/支付款項合共 ，詳情如下：

Item No. 編 號	Approved item 獲 批 准 項 目	Balance of Unclaimed Amount *of each item* at the time of submitting this form 在遞交表格時*各獲批准項目*仍未申領的撥款餘數	Amount claimed 申領款額
(1)	Personal emolument	$36,000	$36,000.00
(2)	Publicity	$6,120	$6,120.00 (機構支付$1,639)
(3)	Preventive education activities	$3,261	$260.00
(4)	Transportation	$1,509	$1,042.70
		Total 總 數 :	$43,422.70

請付款予§
Payment should be made to: Anti-drug Pioneer Alliance

地址 Address: Shop 111, Tung Yuen Hse, Chuk Yuen North Estate

Original copy of receipts/invoices are attached. For further information, please contact:
☑*茲隨表格附上單據/發票的正本。如需進一步詳情，請聯絡:

Name 姓名: Felix Wong Tai Ho Tel. no.電話: 2111 1111

*: Tick where applicable 請在適當方格加上"✓" 號

§: Please provide cheque addressee in English 請提供英文支票抬頭

繼下頁 Go to next page

發放款項流程 – 發還款項申請表

Section 3 : **PROJECT PROGRESS REPORT**
第三節

(a) Summary of the progress made since the last claim form was submitted -

Please give a brief report on individual activities which had been completed. This should include date, time, venue, number of participants and their feedback on the activities, etc. Attach photographs of the activities if available.

The following activities were held from Jan to Feb 2018:

Name	Date	No. of participants	Remarks
Visit Drug InfoCentre	2018-01-16	20	(summary of group activities and brief evaluation)
Day camp	2018-02-10	50	(summary of group activities and brief evaluation)

Photos are attached.

(b) Evaluation on Output Indicators

Please list the output indicators as stated in the implementation plan and give an evaluation on the accumulative output achieved so far counting from the project commencement date. Relevant output Excel file should be submitted with the half-yearly progress report every six months. Prior approval should be obtained from the Beat Drugs Fund Association in case of revision in output indicators or targets.

	Description of Indicator (with targets)	Target Population	Output Achieved So Far and % of Target	Remarks (Please provide **explanation for below-target output[a] and report the remedial action(s)[b] taken (or planned)** to meet the target)	For official use
Output indicator 1					☐ PS ☐ PNS ☐ P
Output indicator 2					☐ PS ☐ PNS ☐ P
Output indicator 3					☐ PS ☐ PNS ☐ P

4. 請參照“執行時間表” (Implementation Plan) 填寫

[a] Below-target output refers to the output indicators not meeting the expected interim target, calculated according to the implementation schedule in Part (G) of the implementation plan.
[b] Concrete remedial action(s) must be provided for those activities achieving less than 90% of the expected interim target.

發放款項流程 – 發還款項申請表

(c) Evaluation on Outcome Indicators

Please list the outcome indicators as stated in the implementation plan and give an evaluation on the outcome achieved so far counting from the project commencement date. Relevant Excel data file should be submitted with the half-yearly progress report every six months. Prior approval should be obtained from the Association in case of revision in outcome indicators or targets.

	Description of Indicator (with targets)	Evaluation Method Used (e.g. pre- and post-test survey, post-test survey, etc.)	Data Collected So Far and Preliminary Results	Remarks (Please report any **remedial action(s) taken (or planned) to improve programme effectiveness**)	For official use
Outcome indicator 1					☐ RS ☐ RNS ☐ P
Outcome indicator 2					☐ RS ☐ RNS ☐ P
Outcome indicator 3					☐ RS ☐ RNS ☐ P

5. 請參照“執行時間表” (Implementation Plan) 填寫

From: 由 Anti-drug Pioneer Alliance (Name of grantee and official seal) 獲撥款人/機構名稱及蓋章

Date: 日期 31 March 2018

Signature of project-in-charge: 計劃主管簽署 Felix

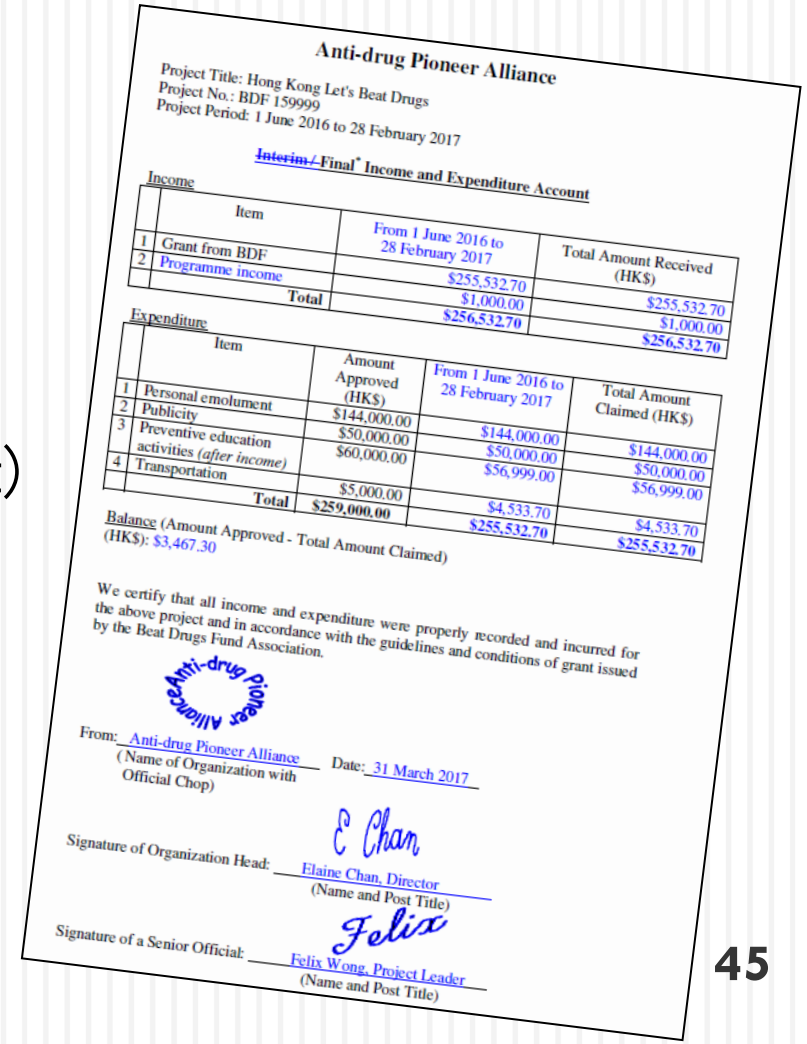
Name & Title: 姓名及職銜 Felix Wong, Project Leader

Signature of senior officer: 獲撥款人/機構高級職員簽署 E Chan

Name & Title 姓名及職銜 Elaine Chan, Director

發放款項流程 – 收支結算表

- 就「實報實銷」還款項目，機構提交發還款項申請表及開支收據時，須一併提交「收支結算表」（income and expenditure account）



Anti-drug Pioneer Alliance

Project Title: Hong Kong Let's Beat Drugs
Project No.: BDF 159999
Project Period: 1 June 2016 to 28 February 2017

~~Interim~~ / Final* Income and Expenditure Account

Income

	Item	From 1 June 2016 to 28 February 2017	Total Amount Received (HK$)
1	Grant from BDF	$255,532.70	$255,532.70
2	Programme income	$1,000.00	$1,000.00
	Total	**$256,532.70**	**$256,532.70**

Expenditure

	Item	Amount Approved (HK$)	From 1 June 2016 to 28 February 2017	Total Amount Claimed (HK$)
1	Personal emolument	$144,000.00	$144,000.00	$144,000.00
2	Publicity	$50,000.00	$50,000.00	$50,000.00
3	Preventive education activities *(after income)*	$60,000.00	$56,999.00	$56,999.00
4	Transportation	$5,000.00	$4,533.70	$4,533.70
	Total	**$259,000.00**	**$255,532.70**	**$255,532.70**

Balance (Amount Approved - Total Amount Claimed) (HK$): $3,467.30

We certify that all income and expenditure were properly recorded and incurred for the above project and in accordance with the guidelines and conditions of grant issued by the Beat Drugs Fund Association.

From: Anti-drug Pioneer Alliance (Name of Organization with Official Chop) Date: 31 March 2017

Signature of Organization Head: E Chan Elaine Chan, Director (Name and Post Title)

Signature of a Senior Official: Felix Felix Wong, Project Leader (Name and Post Title)

發放款項流程 – 其他財務文件

Name of Grantee: _____

Project Title/ No.: _____ (BDF _____)

_____ **claim*** covering the period from _____**(dd/mmyy)** to _____ **(dd/mm/yy)**

*(*Pls insert the ordinal number of claim e.g. 1st, 2nd, 3rd etc.)*

Beat Drugs Fund (BDF) Regular Funding Exercise
Checklist for financial documents to be submitted by grantee for disbursement of grants
(For projects adopting reimbursement of grant)

Please read carefully the "Procedural Guidelines for Successful Applicants" (Procedural Guidelines) and the terms and conditions as stipulated in the approval letter and the approved budget for the project issued by the Beat Drugs Fund Association (BDFA) before filling in this Checklist.

(I) Submission of financial documents[1]	Please put a "√" if the document is submitted together with this Checklist	(For Official Use) Date of submission	Remarks	Officer's Initial
(a) Claim form (F21) with all sections (sections 1 to 3) duly completed and certified				
(b) An income and expenditure account				
(c) Completed forms of -				
(i) "Particulars of Income and Expenditure Items" (Appendix IX)				
(ii) "Claim for Travel Expenses" (Form *A, if applicable)*				
(iii) "Records of Personal Emolument" (Form B, *if applicable)*, together with the salary statement/payroll records of project staff, signed by project-in-charge or a senior officer				
(d) Original receipts, payment vouchers and other documents substantiating the nature and the amount of expenditure and transactions, certified by project-in-charge or a senior officer				
(e) Tender/quotation records[2] and/or coupon distribution records (*if applicable)*				
(f) Other financial documents as required in the approval letter and/or approved budget (*please specify if applicable:*_____)				
g) For final payment, additional submission of the following -				
(i) Register of assets (*if applicable; please state "N/A" if not applicable*)				
(ii) Copies of deliverables (*if not already submitted*)				

發放款項流程 – 其他財務文件

Name of Grantee: . . . . . .

Project Title/ No.: . . . . . (BDF _____)

. claim[2] covering the period from . . . . . (dd/mm/yy) to _____ . . . . . (dd/mm/yy)

([1]*To insert the ordinal number of claim, i.e. 1st, 2nd, 3rd etc.)*

Beat Drugs Fund (BDF) Regular Funding Exercise

Checklist for financial documents to be submitted by grantee for disbursement of grants

(For projects adopting reimbursement of grants)

Please read carefully the "Procedural Guidelines for Successful Applicants" (Procedural Guidelines) and the terms and conditions as stipulated in the approval letter and the approved budget for the project issued by the Beat Drugs Fund Association (BDFA) before filling in this Checklist.

(I) Submission of financial documents[1]	Please put a "√" if the document is submitted together	(For Official Use) Date of Receipt	Remarks	Officer's Initial
(a) Claim form (F21) with all sections (sections				
(b) An income and expenditure account				
(c) Completed forms of -				
(i) "Particulars of Income and Expenditur				
(ii) "Claim for Travel Expenses" (Form A,				
(iii) "Records of Personal Emolument" (Form B, *if applicable*, together with the salary statement/payroll records of project staff, signed by project-in-charge or a senior officer				
(d) Original receipts, payment vouchers and other documents substantiating the nature and the amount of expenditure and transactions, certified by project-in-charge or a senior officer				
(e) Tender/quotation records[3] and/or coupon distribution records *(if applicable)*				
(f) Other financial documents as required in the approval letter and/or approved budget *(please specify, if applicable)*: _____[4]				
(g) For final payment, additional submission of the following -				
(i) Register of assets *(if applicable; please state "N/A" if not applicable)*				
(ii) Copies of deliverables *(if not already submitted)*				

Claim form (F21)

發放款項流程 – 其他財務文件

Name of Grantee: . . . . . .

Project Title/ No.: . . . . . (BDF _____)

. claim[2] covering the period from . . . . . (dd/mm/yy) to _____ . . . . . (dd/mm/yy)

(2)To insert the ordinal number of claim, i.e. 1st, 2nd, 3rd etc.)

Beat Drugs Fund (BDF) Regular Funding Exercise

Checklist for financial documents to be submitted by grantee for disbursement of grants

(For projects adopting reimbursement of grants)

Please read carefully the "Procedural Guidelines for Successful Applicants" (Procedural Guidelines) and the terms and conditions as stipulated in the approval letter and the approved budget for the project issued by the Beat Drugs Fund Association (BDFA) before filling in this Checklist.

(I) Submission of financial documents[1]	Please put a "√" if the document is submitted together with this Checklist	(For Official Use) Date of submission	Remarks	Officer's Initial
(a) Claim form (F21) with all sections (sections 1 to 3) duly completed and certified				
(b) An income and expenditure account				
(c) Completed forms of -				
officer				
(d) Original receipts, payment vouchers and other documents substantiating the nature and the amount of expenditure and transactions, certified by project-in-charge or a senior officer				
(e) Tender/quotation records[3] and/or coupon distribution records *(if applicable)*				
(f) Other financial documents as required in the approval letter and/or approved budget *(please specify if applicable)*: _____[4]				
(g) For final payment, additional submission of the following -				
(i) Register of assets *(if applicable; please state "N/A" if not applicable)*				
(ii) Copies of deliverables *(if not already submitted)*				

An income and expenditure account

發放款項流程－擬備財務文件需注意事項

核數師報告的分項開支
(cost item)**上限**應與獲批財政預算
(approved budget)相符

核數師報告的**用款數字**
應與「收入及支出細項表」相符

發放款項流程 – 擬備財務文件需注意事項

向基金申領的**員工薪酬**不可
超過獲批的月薪／時薪金額

未獲准的開支（例如購置
固定資產開支）
不應向基金申請還款

- 如文件混亂或不齊全，
  基金會須要求機構提交相關解釋或補充文件，
  可能因此阻延發放款項的程序
- 請提名前線同工參加稍後在4月舉行的**「擬備財務文件」工作坊**

發放款項流程 – 擬備財務文件需注意事項

2017 Funding Exercise of the BDF Regular Funding Scheme

Toolkit - Submission of Documents to BDFA

(For projects engaging auditors for auditing and assurance)

	Documents to be submitted	Reporting Period	Due Date for Submission
(i)	• Reply cum undertaking • Implementation plan (sample at ***Attachment 1***)	N/A	20 April 2018
(ii)	• Projection of interim targets (sample at ***Attachment 2***)	N/A	Around 2 weeks after the 3rd month of project implementation
(iii)	• Half-yearly progress report (sample at ***Attachment 3***)[1] • Activity records / Record of Output Indicators • BDF Evaluation Database (outcome)	6 months from project start date	Within 3 weeks from the end of reporting period
(iv)	• Half-yearly progress report • Activity records / Record of Output Indicators • BDF Evaluation Database (outcome)	12 months from project start date	Within 3 weeks from the end of reporting period
	• Annual auditor's report and supporting financial documents (Checklist for financial documents at ***Attachment 4***; specimen/samples at **Attachments 5 to 8**)		Within 2 months after the end of reporting period
(v)	• Half-yearly progress report[2] • Activity records / Record of Output Indicators • BDF Evaluation Database (outcome)	18 months from project start date	Within 3 weeks from the end of reporting period

發放款項流程 – 擬備財務文件需注意事項

	Documents to be submitted	Reporting Period	Due Date for Submission
(vi)	• Full report • Activity records / Record of Output Indicators • BDF Evaluation Database (outcome) • Project-end Powerpoint • Other project deliverables, if any • Final auditor's report and supporting financial documents (Checklist for financial documents at ***Attachment 4***; specimen/samples at **Attachments 5 to 8**)	Project start date to end date	Within 2 months from project completion