**Annex 3.1**

**Schedule for Funding and Service Agreement services / Funding and Service Agreement-related activities supported by Other**

**Funds or Donations for Designated Purposes**

**Analysis of Income and Expenditure for the Period from 1 April 20XX to 31 March 20XX**

Name of Non-Governmental Organisation (NGO) (code): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ (\_\_\_\_\_\_\_\_\_)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Activity Name** | **Source of funding** | **Income Received** | | | **Actual Expenditure**  **(Note 3)**  **(c)**  **$** | **Surplus / Deficit**  **(Note 4)**  **(d) = (a) + (b) – (c)**  **$** |
| **Other Funds or Donations for Designated Purposes**  **(Note 1)**  **(a)**  **$** | **Programme Income**  **(Note 2)**  **(b)**  **$** | **Total**  **= (a) + (b)** |
| 1. **Funding and Service Agreement (FSA) services** | | | | | | | |
| 1 |  | **Sub-total (i)** |  |  |  |  |  |
| 2 |
| 3 |
|  |
| 1. **FSA-related activities** | | | | | | | |
| 1 |  | **Sub-total (ii)** |  |  |  |  |  |
| 2 |
| 3 |
|  |
| **TOTAL (i) + (ii)** | | |  |  | **W#** | **T3#** | **U3#** |

Notes:

1. Funding received from sources other than the Social Welfare Department (SWD) for FSA services / FSA-related activities should be properly recorded under Note 5(c) “Other Funds or Donations for Designated Purposes” to the AFR. All relevant supporting documents must be available for inspection by authorised staff of SWD and audit by the Audit Commission.
2. The relevant amount should be properly supported and included under Note 5(a) “Programme Income” to the AFR.
3. NGOs should be responsible for the utilisation of the other funding received for designated purposes for FSA services / FSA-related activities. As the amount aims to reflect the actual cash expenditure, the cost apportionment of Lump Sum Grant resources needs not be included under this column.
4. If there is any unspent balance out of the non-SWD funded FSA services / FSA-related activities that must be returned to the funder, such payment shall be borne by the NGO’s own resources.

#Amounts should tally with those reported in the column of “Other Funds or Donations for Designated Purposes” in Note 8 to the AFR.

Confirmed by :

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chairman: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NGO Head / Head of Social Welfare Services: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_