

**Enhancing Self-Reliance Through District Partnership (ESR) Programme  
Application for Reimbursement of Auditors' Remuneration**

**「伙伴倡自強」社區協作計劃申請發還審計師費用表格**

<b>Name of organization :</b> 受資助機構名稱			
<b>Project name :</b> 計劃名稱		<b>Project No. :</b> 計劃編號	ESR
<b>Total grant approved:</b> 計劃撥款額		<b>Date of approval :</b> 計劃批准日期	

<b>Audit Period</b> 審計年度 (1st or 2nd)	<b>Maximum Annual Auditor's Remuneration Payable</b> <sup>(Note 1)</sup> 每年可發還審計師費用上限 <sup>(備註1)</sup> (HK\$)	<b>Auditor's Remuneration to be claimed this time</b> 是次申請發還審計師費用金額 (HK\$)	<b>Receipt No.</b> <sup>(Note 2)</sup> 單據編號 <sup>(備註2)</sup>

**Note 備註**

- (1) Auditors' remuneration payable for the first 2 years related to the approved project (not as part of the grant for the project) can be claimed on a reimbursement basis according to the following scale – 與獲批計劃有關的首兩年審計師費用(核准計劃的撥款並不包括的審計師酬金)可以先墊後付的方式申請發還，數額如下-

<b>Size of the Grant</b> 資助額 (HK\$)	<b>Maximum Annual Auditors' Remuneration Payable</b> 每年可發還的審計師費用上限 (HK\$)
Less than 1 million 100 萬以下	5,000
1 million to 3 million 100 萬至 300 萬	10,000

- (2) All supporting receipts for payments met by funding of ESR Programme and the relevant Records of Quotations should be submitted and certified as being correct. 所有由「伙伴倡自強」社區協作計劃支付的支出，必須有單據及相關報價記錄及招標文件，並經機構查證無誤及印上機構的蓋章後連同本表格一同遞交或寄回。

**Certification by organization 機構聲明**

I certify that 本人茲證明：

- (1) the information provided above is correct and without any omission;  
上述資料均準確無誤及並無缺漏；
- (2) All the services detailed were considered reasonable and necessary to the project, and all expenditures are in compliance with the terms and conditions as stated in the project agreement;  
所有購買的服務均屬合理及有必要，並且均遵照計劃協議內的條款辦事；
- (3) procurement procedures of all services of the project are in compliance with the terms and conditions as stated in the project agreement; the prices quoted and accepted for purchases of services in the project are considered reasonable compared with the market prices;  
為計劃購入的服務，已遵照計劃協議內的採購程序辦事，其報價及價格與市場水平比較均屬合理；
- (4) the expenditure listed is solely incurred for the use of the above mentioned project.  
所有支出項目均只用於被核准的計劃。

<p>Official Chop 機構蓋章</p>
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Name of responsible officer\*:

負責人姓名\* \_\_\_\_\_

Signature :

簽署 \_\_\_\_\_

Post :

職位 \_\_\_\_\_

Date :

日期 \_\_\_\_\_

\*必須為「伙伴倡自強」社區協作計劃撥款協議中附表 I 所列獲授權核證開支及動用指定銀行帳戶的人士。 Person(s) authorized to certify expenditure and operate the designated bank account as stipulated in Schedule I of the agreement in respect of grant under the Enhancing Self-Reliance Through District Partnership Programme.