

The following pages contain the various forms relating to the Yau Tsim Mong Community Involvement Fund. Applicant organisations can print them for use or download them from the website of the Home Affairs Department at https://www.had.gov.hk/en/18_districts/my_map_09.htm#06.

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Form 1

Application for a Grant under Community Involvement Fund (“CI Fund”)
Yau Tsim Mong District Office

1 Basic Information

(A) Name of Applicant: (Chinese) _____

(English) _____

(B) Registered Address: _____

Correspondence Address: _____

(If different from the _____

registered address) _____

(C) Telephone No.: _____ Fax No.: _____

(D) The Applicant is –

☐ registered under _____

Ordinance (please attach related documentary proof)

☐ a body of persons established for the benefit of _____

District.

(E) Responsible Persons

Authorised Person ¹ of the Applicant	Designated Officer-in-charge ² of the Project
Name: (Chinese) _____	Name: (Chinese) _____
(English) *Mr/Ms/Miss _____	(English) *Mr/Ms/Miss _____
_____	_____
Post: _____	Post: _____
Contact Tel No.: _____	Contact Tel No.: _____
Fax No.: _____	Fax No.: _____
Email Address: _____	Email Address: _____

* Please delete as appropriate

(F) Record of Application for CI Fund

¹ Authorised Person refers to the person who signs the application form for and on behalf of the Applicant. He/she has been duly authorised by the Applicant to sign this application form, the contents of which are valid and binding on the Applicant.

² Designated Officer-in-charge serves as the contact officer of the project who may also certify the receipts and supporting documents for the purpose of reimbursement of CI Fund. Authorised Person and Designated Officer-in-charge can be the same person.

- ☐ This is our first application for CI Fund
- ☐ We previously applied for CI Fund
- ☐ but our application was not approved.
- ☐ and grants were approved. Details of the last three applications over the past five years, if applicable, are as follows:

Name of Activity Date of Activity Amount Approved (\$) Project No.

1. _____
2. _____
3. _____

2 Details of Co-organisier(s) (For project to be implemented in collaboration with other organisations/ District Councils (DCs)/ District Offices (DOs)/ Committees and Working groups (C/WGs) under DCs/DOs)

Name of Co-organisier Organisation(s)/ Name of Contact Person(s)/ Telephone No./ Fax No./ Email Address	Brief Description of the Nature and Form of Collaboration or Support
1.	
2.	

3 Details of the Proposed Project

- (A) Name of Project: _____
- (B) Nature: _____
- (C) Objectives: _____
- (D) Date/ Period of Implementation: _____
- (E) Setting-up/ Preparation Period: _____
- (F) Amount of Grant Applied for: \$ _____
- (G) Venue: _____
- (H) Content: _____
- (I) Target Group(s): _____
- (J) Estimated Number of Participants/ Audience: _____
- (K) Publicity and Promotion Method: _____
- (L) Expected Benefits/ Achievements
(Please propose performance measurement and milestones in quantifiable terms if applicable):
- (1) _____
- (2) _____
- (3) _____
- (M) Work Plan/ Implementation Timetable

Action	Timetable

- (N) Ticket Allocation Proposal (If applicable):

4 Budget and Cash Flow Projection

(A) Estimated Income and Expenditure Statement

Estimated Income (If applicable)	Number (i)	Unit Rate \$ (ii)	Total Amount \$ (iii) = (i) x (ii)
Participants' fees			
Internal resources			
Sponsorship & donation			
Others			
Total Estimated Income (a)			

Estimated Expenditure³	Quantity (i)	Unit Cost \$ (ii)	Total Amount \$ (iii) = (i) x (ii)
Total Estimated Expenditure (b)			

Amount of CI Fund under Application (c) = (b) – (a)	
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³ If funds are to be expended for procurement of capitalised items, the applicant is required to state in Section 5 (i.e. part on "Other information") of this Annex whether capitalised items have been procured with CI Fund. If affirmative, a copy of the register/inventory record should be submitted together with the application form.

(B) Cash Flow Projection (If applicable)

	Projected Cash Flow								
	1st Year (\$)		2nd Year (\$)		3rd Year (\$)		4th Year (\$)		Total Amount (\$)
	Months 1-6	Months 7-12	Months 1-6	Months 7-12	Months 1-6	Months 7-12	Months 1-6	Months 7-12	
(a) Income									
(b) Expenditure									
Net Cash Flow Requirement ((b) – (a))									

(C) Requirement of Advance Payment⁴

Year	Date of Advance Payment to be Required	Amount Required (\$) and Intended Purpose
Year 1		
Year 2		
Year 3		
Year 4		

5 Other Information

Please provide any other information relevant to the project proposal which should be taken into account in considering the application.

⁴ The advance payment for the first year will be released upon approval of the project. A fresh application should be submitted if advance payment is required for the subsequent years of project implementation.

6 Alternative Funding Support

Please indicate how the proposed project will be financed if the application is rejected or the approved project fund is less than the proposed amount under application.

(A) Other sources of income

- ☐ Internal resources
- ☐ Sponsorship and donation
- ☐ Increase participants' fees
- ☐ Others (Please specify)

(B) ☐ Cancel the project

(C) ☐ Others (Please specify)

7 Declaration of Interest

- ☐ The Applicant hereby declares that itself, all the relevant member(s), employee(s), agent(s), contractor(s), and co-organiser(s) involved in the project have no pecuniary or other interest, direct or indirect, relating to the project application.
- ☐ The Applicant hereby declares that itself, or one or more of the relevant member(s), employee(s), agent(s), contractor(s), and co-organiser(s) involved in the project have pecuniary or other interest, direct or indirect, relating to the project application. The particulars of such matter are stated below –

8 Undertaking and Declaration of the Applicant

8.1 In consideration of the Government of the Hong Kong Special Administrative Region (“Government”) contemplating this application for a grant under the CI Fund –

- (A) The Applicant hereby declares that all the information given in this application is true, accurate and complete. The Applicant understands and agrees that any inaccurate or false information will render the application invalid, any grant approved will be withheld and any payment made must be refunded to the Government. The Applicant also acknowledges that the Government reserves the right to seek recovery of any money overpaid or fraudulently claimed from the CI Fund, as a civil debt due to the Government.
- (B) The Applicant hereby declares and undertakes that neither itself nor any of its relevant member(s), employee(s), agent(s), contractor(s) and co-organisier(s) (collectively “Relevant Personnel”) has engaged in (i) any act or activity that constitutes, or is likely to constitute, an offence endangering national security under the law of the HKSAR (including the Law of the People’s Republic of China on Safeguarding National Security in the Hong Kong Special Administrative Region (HKNSL)); or (ii) any act or activity that is or may be contrary to the interest of national security. The act and activity referred to in (i) and (ii) are collectively referred to as “Prohibited Act”. The Applicant shall not, and shall ensure that none of the Relevant Personnel will, engage in any Prohibited Act.
- (C) The Applicant further declares and undertakes that any money provided to us pursuant to this application will not be used to finance any project that involves, or may in the reasonable opinion of the HAD, involve commission of any Prohibited Act.
- (D) The Applicant understands and agrees that even if the application is approved, the Director of Home Affairs may terminate funding, request the grantee to refund the amount of payment released or repay any advance payment if it is subsequently found that the project has any national security concerns. The Applicant understands that the Applicant, or the relevant member(s), employee(s), agent(s), contractor(s) and/or co-organisier(s) of this application will be liable to relevant criminal offences if the project has any national security concerns.

(E) We hereby further undertake that:

- (a) we and each Relevant Personnel shall at all times comply with the laws of the HKSAR (including the HKNSL);
- (b) neither we nor any of the Relevant Personnel shall commit any Prohibited Act;
- (c) no Prohibited Act will be committed in delivering or carrying out the project to which an application for CI fund or a grant of CI fund relates; and
- (d) we shall forthwith upon its becoming aware of commission of a Prohibited Act by any person, report the Prohibited Act to the Police and other relevant law enforcement agencies.

8.2 On behalf of the Applicant, I hereby agree and consent that the information provided in this application form may be used by the Government to process the application, conduct evaluative studies and training/sharing sessions and for the purposes stated in the personal data collection statement. I further agree and consent that should this application be approved, all information contained in the application form and the subsequent reports (including but not limited to that concerning the Applicant and project details) may be released for inspection by the public and published by the Government for general information. I agree to publicise the fact that the project is supported by the District Office and undertake to display the name of the District Office and HAD and, as far as practicable, the logos of “Government-funded Programme” and HAD in all publicity materials and activities related to the project.

8.3 I have read and fully understood the contents of the Funding Guide on Community Involvement Programme (copy attached / at the following link: https://www.had.gov.hk/surl?ci_funding_guide_e), including its Annex C (Terms and Conditions For Receiving Community Involvement Fund) and such other requirements, directives, terms and conditions as may from time to time be issued by the Government concerning the CI fund, as well as this Undertaking and Declaration (collectively the “Terms of the Grant”); and the submission of this application shall constitute an offer from the Applicant to comply with and be bound by the Terms of the Grant should this application be accepted by the Government.

8.4 I hereby agree and undertake on behalf of the Applicant to observe, comply with and be bound by the Terms of the Grant (including dissemination of the undertakings, requirement of declaration of interest and national security requirements therein to the concerned member(s), employee(s), agent(s), contractor(s) and co-organiser(s)) should this application be accepted by the Government.

8.5 The Applicant confirms that the signatory below has been duly authorised by the Applicant to sign this application form, the contents of which are valid and binding on the Applicant.

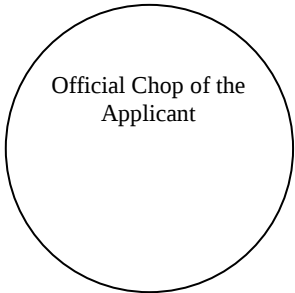
Name of Applicant:

Signature of
Authorised Person:

Name of
Authorised Person:

Post:

Date:



Purposes of Collection

1. The personal data provided by means of this form will be used by the Home Affairs Department for the purposes of handling matters relating to the use of the Community Involvement Fund as well as promoting community involvement activities and public participation in community affairs. The collection of the required data is obligatory and Applications with incomplete personal data as required above will not be considered.

Classes of Transferees

2. The personal data provided by means of this form may be disclosed to other Government departments, bureaux and relevant persons and bodies for the purposes mentioned in paragraph 1 above.

Access to personal data

3. The responsible officer(s) of the Applicant has/have a right of access and correction with respect to personal data as provided for under the Personal Data (Privacy) Ordinance (Cap. 486). The right of access includes the right to obtain a copy of the data subjects' personal data provided by this form.

Enquiries

4. Enquiries concerning the personal data collected by means of this form, including access to and correction of the personal data, should be addressed to -

Executive Officer I (District Council)

Community Involvement Programme
Secretariat

Yau Tsim Mong District Office

Tel.: 2399 2587

Form 1 (Annex)

- Please supplement the details of part 4(A) 'Budget and Cash Flow Projection' by filling in the following table:

Item	Unit cost (\$)	Quantity	Estimated expenditure (\$)	Amount of YTMCI Fund applied for (\$)	Code No. of expenditure item (please refer to Appendix I of the Guidance Notes)	To be filled in by YTMDO	
						Maximum subsidy amount of that particular item under the Guidance Notes, subject to funding approval from YTMDO (\$)	Increased maximum subsidy amount of that particular item, subject to approval from YTMDO (\$)
e.g.(1) tour coaches	1,200	3	3,600	3,000	6.2		
e.g.(2) seedlings for tree planting	2	50	100	100	16		
1.							
2.							
3.							
4.							
5.							
6.							
7.							
Total:							

- Please submit the following supplementary document together with the application form:
 - ☐ Certificate of registration (requirement for all applicant organisations)
 - ☐ Certificate of registration as a society/association;
 - ☐ Incorporation document; or
 - ☐ Others (please specify) _____
 - ☐ Tax exemption document issued by the Inland Revenue Department
 - ☐ Constitution of the organisation
 - ☐ Brief notes on the activities held in the previous year (to be submitted for first-time application)
 - ☐ Latest financial information (if the funds granted by the YTMDO exceed \$35,000)
 - ☐ Others (please specify) _____

Letter of Consent

To: The Government of the Hong Kong Special Administrative Region
[Attn: District Officer (Yau Tsim Mong)]

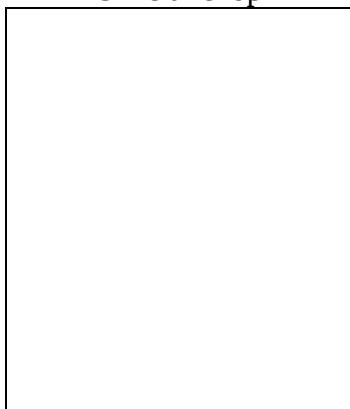
Reference no.: YTMCB _____

We have read and fully understood the contents of the Funding Guide on Community Involvement Programme and Guidance Notes for Yau Tsim Mong Community Involvement Programme, including its Appendix II (Terms and Conditions For Receiving Community Involvement Fund) and such other requirements, directives, terms and conditions as may from time to time be issued by the Government concerning the CI fund, as well as this Undertaking and Declaration (collectively the “Terms of the Grant”).

We ***will/will not** implement the following project in accordance with the conditions set out in the letter of the Community Involvement Programme Secretariat of Yau Tsim Mong District Office dated _____ :

Project name : _____
Implementation date : _____
Approved grant : \$ _____

Official chop

A large empty rectangular box for an official chop or stamp.

Signature : _____
Name of authorised person : _____
Post : _____
For and on behalf of : _____
(Name of Organisation)
Date : _____

* Delete as appropriate

Purposes of Collection of Personal Data

1. The personal data provided by means of this form will be used by Home Affairs Department for the purposes of handling matters relating to the use of the Community Involvement Fund as well as promoting community involvement activities and public participation in community affairs.

Class of Transferees

2. The personal data provided by this form may be disclosed to other government departments, bureaux and relevant persons and bodies for the purpose mentioned in paragraph 1 above.

Access to Personal Data

3. The responsible officer(s) of the organisation has/have a right of access and correction with respect to personal data as provided for under the Personal Data (Privacy) Ordinance (Cap. 486). The right of access includes the right to obtain a copy of the officer(s)' personal data provided by this form.

Enquiries

4. Enquiries concerning the personal data collected by means of this form, including the access to and correction of the personal data, should be addressed to:

Executive Officer I (District Council)

Community Involvement Programme Secretariat

Yau Tsim Mong District Office

Tel.: 2399 2587

Application for Change of Details of Project

Reference no. : YTMCB _____

Project name : _____

Advance payment received : \$ _____

Original details of project : _____

Revised details of project : _____

(For a change of project implementation date, the revised implementation date must be within two months from the original implementation date)

Reason(s) for the change of details of project:

Current progress of the project:

We undertake to carry out the above project on _____, otherwise we will refund the advance payment and the funds allocated by the Yau Tsim Mong District Office for the project will be withdrawn.

Official chop

Signature : _____

Name of authorised person : _____

Post : _____

For and on behalf of : _____

(Name of organisation)

Date : _____

Purposes of Collection of Personal Data

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Executive Officer I (District Council)

Community Involvement Programme Secretariat

Yau Tsim Mong District Office

Tel.: 2399 2587

Name of Grantee: _____

Project Name: _____

Project Number: _____

Project Implementation/ Commencement Date: _____

Project End Date: _____

Total Approved Project Fund: _____

Approved Project Fund for Current Year: _____

Total Amount of CI Fund already Received: _____

Nature of Current Claim and Amount : Partial (1st/2nd*)/ Final
Reimbursement of Year 1/2/3/4*

(A)	Total Income (Details as per Attachment I)	
(B)	Total Expenditure (Details as per Attachment II)	
(C)	Total Amount to be met by CI Fund (\$) (B) – (A)	
(D)	Amount of CI Fund already received (\$)	
	Advance Payment	
	1 st Partial Reimbursement	
	2 nd Partial Reimbursement	
	Total	
(E)	Amount for application for reimbursement with supporting receipts* (\$)	
(F)	Amount for clearance of advance payment with supporting receipts* (\$)	
	Amount of advance payment already cleared	
(G)	Surplus amount to be returned to the Government (\$) (D) – (C)	

YTMCI Fund - Form 4 (Rev-2024E)

Part C: Certification by Authorised Person of Grantee

I certify that –

- (1) the information provided above is correct and other sources of income including sponsorship and donation stated in Part B are complete without any omission;
- (2) the goods purchased have been received in good order and all the services detailed were considered reasonable and necessary to the project, and all expenditures are in compliance with the Funding Guide on Community Involvement Programme (the “Funding Guide”) and the terms and conditions imposed by the Director of Home Affairs (DHA) or his/her authorised officers;
- (3) the prices quoted and accepted for purchases of goods and services in the project are considered reasonable compared with the market prices;
- (4) the expenditure listed in Part B is solely incurred for the use of the above mentioned project; and
- (5) the amount of Central Administrative Overheads claimed has not been covered by government subvention.

Signature:

Name:

Post:

Name of Grantee:

Date:

Official
Chop

For official use only

The above has been checked and I am satisfied that the information found to be in compliance with the Funding Guide and the terms and conditions imposed by the DHA or his/her authorised officers.

Signature :

Name :

Designation[^] :

Date :

Signature :

Name :

(ADO/SEO(DC))

Date :

[^] Rank of the officer should be EOII or above or equivalent

Details of Income Items

Item	Number/ Quantity	Unit Rate (\$)	Total Income (\$)	Original Estimated Amount of Income (\$)
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____
8. _____	_____	_____	_____	_____
9. _____	_____	_____	_____	_____
10. _____	_____	_____	_____	_____
11. _____	_____	_____	_____	_____
12. _____	_____	_____	_____	_____
13. _____	_____	_____	_____	_____
14. _____	_____	_____	_____	_____
15. _____	_____	_____	_____	_____
Total:			_____	_____
			(As per Form 4)	

Details of Expenditure Items

Item	Receipt No.	Total Expenditure (\$)	Amount to be Funded by Other Source(s) of Income (\$)	Amount to be Financed by CI Fund (\$)	Original Approved Amount of CI Fund (\$)
(As per Form 4)					

Purposes of Collection

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Classes of Transferees

2. The personal data provided by means of this form may be disclosed to other Government departments, bureaux and relevant persons and bodies for the purposes mentioned in paragraph 1 above.

Access to Personal Data

3. The responsible officer(s) of the organisation has/have a right of access and correction with respect to personal data as provided for under the Personal Data (Privacy) Ordinance (Cap. 486). The right of access includes the right to obtain a copy of the data subjects' personal data provided by this form.

Enquiries

4. Enquiries concerning the personal data collected by means of this form, including access to and correction of the personal data, should be addressed to -

Executive Officer I (District Council)
Community Involvement Programme Secretariat
Yau Tsim Mong District Office
Tel.: 2399 2587

Personal Disbursement Record

Project Name : _____

Name of Organisation : _____

Name and ID Card no. (the alphabet and the first three digits)	Address and telephone no.	Service fee or remuneration (\$)	Job nature	Date and time of provision of service	Signature (for acknowledgement of receipt of service fee or remuneration)

Purposes of Collection of Personal Data

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Class of Transferees

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Enquiries

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Executive Officer I (District Council)

Community Involvement Programme Secretariat

Yau Tsim Mong District Office

Tel.: 2399 2587

Record of Quotations for Project Financed by
Community Involvement Fund

*Note: This form is to be completed by the designated person for purchase and endorsed by the authorised person of the grantee/ Designated Officer-in-charge of the project before a purchasing order is made. **The grantee is NOT required to submit this form to the DO unless upon request.** If requested, the grantee is to submit this form according to the deadline set by the DO. Late submission or non-submission of this form despite the DO's request may hinder the reimbursement process and result in rejection of application for reimbursement.*

This form, together with all quotations and documents in relation to the procurement should be kept for five years for inspection by the Government as and when necessary.

The grantee, its member(s), employee(s), agent(s), contractor(s) and co-organiser(s) are required to declare any interest when making procurement of goods and services for the approved project, and are prohibited from soliciting, accepting or offering advantages in the course of planning and executing the project. If there is a conflict of interest, the grantee should decide whether the person(s)/ organisation(s) concerned should abstain from the procurement exercise and record the reasons for its decision.

- (a) Project Name: _____
- (b) Name of Grantee: _____
- (c) Designated Person for Purchase and Position: _____
- (d) Telephone No.: _____
- (e) Written quotations / confirmations on the bidding prices obtained

Itemised Description of Goods/ Services	Name of Suppliers/ Contractors Invited	Written Quotations/ Confirmations			Remarks
		Date Received	Price (\$)	Accepted or Not (✓) or (X)	
	1.				
	2.				
	3.				
	4.				
	5.				

All written quotations for the above-mentioned goods/ services are per attached.

- (f) Where written quotations are not available, the suppliers/ contractors' confirmation on the bidding prices are attached with the following contact details –

Name of Suppliers/ Contractors	Address	Contact Person	
		Name	Tel. No.

- (g) Reasons for non-compliance of the prescribed procurement rules set out in the Funding Guide on Community Involvement Programme (“Funding Guide”)* and repeated purchases of the same or similar items/ services within a short period (Please put a “√” as appropriate) –

- ☐ Sole supplier/ contractor in the market
- ☐ Designated supplier/ contractor as specified by sponsor
(Please provide justification : _____)
- ☐ No response from other invited suppliers/ contractors
- ☐ The only supplier/ contractor who meets all the mandatory user specifications
- ☐ Proprietary items that cannot be purchased from other suppliers/ contractors for compatibility (e.g. component parts for capitalised items) and/or contractual requirements
- ☐ Other
(Please specify: _____)

- (h) I certify that the quotations obtained above are genuine and all written quotations or suppliers/ contractors' confirmation on the bidding prices are attached. The price quoted and accepted for purchase is considered reasonable compared with the market price.
- (i) I have read and understood the contents of the Funding Guide and the terms and conditions of the grant and hereby agree to observe the provisions contained in the aforesaid documents.

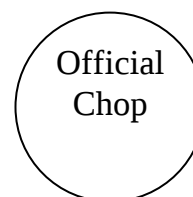
(Signature) _____ Date

(Name and Post)
Designated Person for Purchase^{Note}

Endorsed by:

(Signature) _____ Date

(Name in Block Letters)
Authorised Person of the Grantee /
Designated Officer-in-charge of the
Project^{Note}



Note: The Designated Person for Purchase and the Authorised Person of the Grantee / Designated Officer-in-charge of the Project should not be the same person.

* The link to the Funding Guide on Community Involvement Programme –
https://www.had.gov.hk/surl?ci_funding_guide_e

Purposes of Collection

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Classes of Transferees

2. The personal data provided by means of this form may be disclosed to other Government departments, bureaux and relevant persons and bodies for the purposes mentioned in paragraph 1 above.

Access to Personal Data

3. The responsible officer(s) of the organisation has/have a right of access and correction with respect to personal data as provided for under the Personal Data (Privacy) Ordinance (Cap. 486). The right of access includes the right to obtain a copy of the data subjects' personal data provided by this form.

Enquiries

4. Enquiries concerning the personal data collected by means of this form, including access to and correction of the personal data, should be addressed to –

Executive Officer I (District Council)
Community Involvement Programme Secretariat
Yau Tsim Mong District Office
Tel.: 2399 2587

Production of Souvenirs

To: The Government of the Hong Kong Special Administrative Region
(Attn: District Officer (Yau Tsim Mong))

Reference No.: YTMCB _____

Our organisation has produced a total of _____ souvenirs. Please see the attached photograph(s) as proof. The souvenirs have all been distributed in the following manner:

(If applicable) The souvenirs have not been fully distributed. The remaining souvenirs will be handled in the following manner:

Official chop

Signature of authorised person : _____
Name : _____
Post : _____
For and on behalf of : _____
(Name of organisation)
Date : _____

Final Report for Project Financed by Community Involvement Fund

- (1) Name of Grantee: _____
- (2) Name of Project: _____
- (3) Project No.: _____
- (4) Date/Period of Implementation and Time: _____
- (5) Venue: _____
- (6) Financial Summary
- (a) Total Income: \$ _____
- (b) Total Expenditure: \$ _____
- (c) Amount of CI Fund Obtained [(b) – (a)]: \$ _____
- (7) Number of Programmes/ Activities Already Conducted

Dates of Programmes/ Activities Conducted		Number of Participants	
Original Proposed Date	Actual Date	Target	Actual

(8) Evaluation of Project

(i) General Response of Participants

(ii) Benefits/ Achievement of the Project

(9) Declaration of Interest

(A) Declaration

- ☐ The Grantee hereby declares that itself, all the relevant member(s), employee(s), agent(s), contractor(s), and co-organisier(s) involved in the project have no pecuniary or other interest, direct or indirect, throughout the implementation of the approved project.
- ☐ The Grantee hereby declares that itself, or one or more of the relevant member(s), employee(s), agent(s), contractor(s), and co-organisier(s) involved in the project have pecuniary or other interest, direct or indirect, throughout the implementation of the approved project. The particulars of such matter are stated below¹ -

¹ Please report (i) the persons/companies with whom/which the declaring entity/person (“it/he/she”) has official dealings; (ii) its/his/her relationship with the persons/companies (e.g. relative); (iii) relationship of the persons/companies with the Grantee (e.g. supplier); and (iv) brief description of its/his/her duties which involved the persons/companies (e.g. handling of tender exercise).

(B) Report on Handling of Interests Declared (Only Required if Interest(s) is Declared in Part 9(A) above)

Regarding the information in Part 9(A) above, the existing/potential conflict of interest situation has been handled as follows:

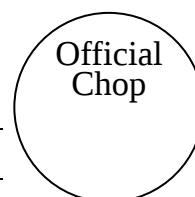
(Please choose from the options below)

- (i) [Name of the grantee, its member(s), employee(s), agent(s), contractor(s), and/or co-organiser(s) concerned] has refrained from performing or getting involved in performing the work, as described in Part 9(A) above, which may give rise to a conflict.
- (ii) [Name of the grantee, its member(s), employee(s), agent(s), contractor(s), and co-organiser(s) concerned] has continued to handle the work as described in Part 9(A) above, provided that there is no change in the information declared by it/him/her, and it/he/she must uphold the grantee's interest without being influenced by his/her private interest.

(iii) Others (please specify)

(10) Report completed by-

Signature of Authorised Person: _____
Name: _____
Post: _____
Date: _____



For Official Use

The report was –

☐ examined and considered in order.

DO's Comments:

Follow-up Action:

Signature of Responsible Officer: _____

Name: _____

Designation: _____

Date: _____

Statement of Payment to Volunteers

Name of Project: _____ Project Number: _____
 Date of Implementation: _____

	Name of Volunteer (Same as HKIC)	HKIC No. (the alphabet and the first three digits)	Telephone No.	Name of Organisation (if applicable)	Purpose of Expenses ^{Note 1}	Amount claimed ^{Note 2} (\$)	Acknowledged Receipt by Volunteer ^{Note 3}
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total:							

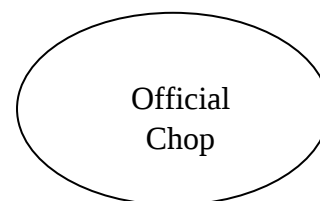
Note 1: When claiming for travelling expenses, please specify the date and means of public transportation (e.g. bus/van).

Note 2: The amount claimed must be expenses entirely and actually incurred by the volunteers for the purposes stated in the "Purpose of Expenses" column for implementation of the above-mentioned project.

Note 3: By signing here, the volunteer acknowledges receipt of the amount claimed and confirms that (i) all the information concerning him/her and the amount and purpose of the expenses claimed by him/her is true and accurate, and (ii) the expenses claimed were entirely and actually incurred by him/her for the purpose stated for implementation of the project. The volunteer also understands that the Government reserves the right to seek recovery of any money overpaid or incorrectly claimed as a civil debt due to the Government, without prejudice to its other rights and remedies.

I hereby declare that all the information given above is true and accurate and the expenses claimed were entirely and actually incurred by the volunteers for the designated purposes for implementation of the above-mentioned project.

Signature of Authorised Person of Grantee* : _____
 Name of Authorised Person of Grantee* : _____
 Name of Grantee* : _____
 Date : _____



* "Grantee" in this form refers to the recipient of Community Involvement Fund.

Purposes of Collection

- The personal data provided by means of this form will be used by Home Affairs Department for the purposes of handling matters relating to the use of Community Involvement Fund as well as promoting community involvement activities and public participation in community affairs.

Classes of Transferees

- The personal data provided by means of this form may be disclosed to other Government departments, bureaux and relevant persons and bodies for the purposes mentioned in paragraph 1 above.

Access to personal data

- The responsible officer(s) of the organisation has/have a right of access and correction with respect to personal data as provided for under the Personal Data (Privacy) Ordinance (Cap. 486). The right of access includes the right to obtain a copy of the data subjects'

personal data provided by this form.

Enquiries

4. Enquiries concerning the personal data collected by means of this form, including access to and correction of the personal data, should be addressed to the Community Involvement Programme Secretariat of Yau Tsim Mong District Office (Tel. No.: 2399 2558).