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| **Project Cost Reconciliation and Reporting Form** |
| (to be completed at the end of the funding period) |
| URN: |  |
| Name of Applicant Organisation: |  |
| Project Title: |  |
| Funding Period for this Claim: | From:  |
|  | To:  |
|  |
| **PROJECT COST RECONCILIATION:** |
| Please list the breakdown of your original budget as stated in the Project Budget Forecast Form for the whole project and then list what your actual spend has been. Figures should be rounded up to the nearest whole £. |
|  |
| **Total expenditure for the period:** | **Budget** | **Actual Spend** | **Variance** **(over or under spend)** |
| Staff costs (including on-costs): |  |  |  |
| Equipment hire/purchase: |  |  |  |
| Hire of facilities: |  |  |  |
| Promotion/publicity: |  |  |  |
| Coaches fees/expenses: |  |  |  |
| Transport/travel costs: |  |  |  |
| Other (please specify): |  |  |  |
| Other (please specify): |  |  |  |
| Total costs: | £ | £ | £ |
|  |
| Please provide a brief explanation for any variance plus or minus 25% or the original expected expenditure: |  |  |
|  |
| If your project has not used all of the award given by Sport England please explain how much is remaining *(if Sport England fully funded your project, this will be the amount in the third column in the table above)*: | £ |  |
|  |
| You can apply to spend any unspent funds remaining. If you would like to do so, please explain how you would spend the remaining funds *(each case will be dealt with on its own merits. Only requests that have similar aims and objectives to those in the original application are likely to be granted)*: |  |  |
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| **Project Cost Reconciliation and Reporting Form *(continued)*** |
| Please note, your organisation should keep all evidence of expenditure for a period of not less than 12 months after the project end date. Sport England may request you submit this evidence and failure to provide it may result in us seeking repayment of the grant in whole or in part. |
| **Project Progress** |
| 1. | How is your project progressing against its Aims and Objectives? *(Please refer to the project portal for further guidance)*: |  |  |
|  |
| 2. | How many people have benefited from your project? |  | **Beneficiaries** | **Throughput** |  |
| Male | Female | Male | Female |
| **Children 0-13:** |  |  |  |  |
| **Young People 14-25:** |  |  |  |  |
| **Adults 26+:** |  |  |  |  |
| **Totals:** |  |  |  |  |
|  |
| 3. | What have been the main achievements of your project during the reporting period? What are the main reasons behind these successes? |  |  |
|  |
| 4. | What have been the main problems in the delivery of your project *(if any)*? What are the main reasons behind these problems and how have you tried to overcome them? Has this worked? |  |  |
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| 5. | If you have any further comments about any aspect of your project or the programme in general, please write them in the box below. ***If you want to provide more information then please do so by enclosing it with this project report form.*** |  |  |
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| **Declaration** |
| For all claims, this form must be signed by two authorised senior officials of the applicant organisation. Note that both the signatures must be originals and the photocopies or forms sent via fax or email are not valid. We hereby certify that the figures detailed on this form represent the actual expenditure for the period under review. We further certify that the activities to date have been properly and fully carried out to an acceptable standard and completed satisfactorily in accordance with the Conditions of Award. |
| **Official of applicant organisation:** | **Counter** **Signatory**: |
| Signature: |  | Signature: |  |  |
| Print Name: |  | Print Name: |  |
| Job Title: |  | Job Title: |  |
| Date: |  | Date: |  |
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