

Remarks:

- 1) Please fill in participant list in page 3 for group activity.
- 2) For reimbursement, please provide the following:
 - (i) Completion Report and
 - (ii) Original receipt(s)/invoice(s) (should be pasted on A4 paper)

Morningside College Life Committee

Completion Report

Name of Event	
Date of Event	
Number of Participants	
Name and Student ID for reimbursement	
Objectives achieved (Yes/No, please provide not more than 150 words on this part)	
Describe what you would do differently to improve the event if you were doing it again	
Other comments (if any)	
Please also send 2-4 photos with resolution of 5MB or above.	

Financial Statement

Expenditure

Category	Receipt/Invoice Reference Number*	Items	Budgeted Expenditure (HKD)	Actual Expenditure (HKD)	Remarks (if any)
eg. Tool					
	<i>Subtotal by Category (HKD)</i>				
eg. Meal					
	<i>Subtotal by Category (HKD)</i>				
eg. Equipment					
	<i>Subtotal by Category (HKD)</i>				
<i>Total (HKD)</i>					
<i>Total Reimbursement Amount (HKD)</i>					

*Please assign sequential reference number on the right hand corner of each supporting receipt/invoice.

Submitted by		
Contact Information	Email	
	Phone	
Submission Date		

Participant List (for group activity)

	Student Name	Student ID	Non-MC Students*	Money collected
			please ✓ as appropriate	
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Remarks (if any):

* Please be reminded to collect all cost involved of the activity from Non-MC students unless otherwise specified.