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| **Reference no. for LOO & LOA:** | **Applicant to fill up** |
| **File no.:** | Click or tap here to enter text. |

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| **PROJECT COSTS** | | | | | | |
| **Description\*** | **Quantity** | **Total Cost** | **For Official Use** | | |
| **Qualifying Cost** | **Grant**  **(50% of qualifying cost up to $2,500)** | |
| **Project (Audit)** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | |
| **Project (Corporate Secretariat)** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | |
| **Project (Tax)** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | |
| **Project (Accounting)** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | |
| **Project (HR & Admin)** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | |
|  |  |  | **Total:** | Click or tap here to enter text. | |
| **Approved grant amount (rounded down to the nearest dollar):** | | | | | Click or tap here to enter text. | |

\*Please attach supporting receipts, invoices, proof of payment, etc.

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| **SUBMISSION CHECKLIST** | |
|  | Receipts and invoices for payment made for the project |
|  | Project report |

Only the sole proprietor, partner or company director of the applicant company, as registered with ACRA or professional bodies, may sign this form. For entities without ACRA registration, the form should be signed off by the CEO, President, Chairman or its equivalent authority.

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| Click or tap here to enter text.  **Signature** | Click or tap here to enter text.  **Date** |
| Click or tap here to enter text.  **Name (Please provide full name as per ACRA registration)** | Click or tap here to enter text.  **Designation** |

**FOR ACRA’S INTERNAL USE**

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|  | Approve |  |
|  | Do not approve | Reasons: Click or tap here to enter text. |