**18-MONTH REPORT (FOR SUBMISSION OF SECOND CLAIM)**

|  |
| --- |
| **Grant Recipient and Project Information** |
| Grant Recipient | <Company Name> |
| UEN | Click or tap here to enter text. |
| Solution category adopted |  [ ]  External Audit Management [ ]  External Audit Management (Audit Confirmation) [ ]  Taxation Management [ ]  Corporate Secretariat Management [ ]  Practice Management System [ ]  Data Analytics Tools |
| Solution name | Click or tap here to enter text. |
| Solution vendor | Click or tap here to enter text. |
| Claim | 2 |

A. Outputs achieved

|  |  |
| --- | --- |
| Usage/ audit log | <insert attachments e.g. downloaded from system/ screenshot of usage (e.g. by license number, account name, etc) with time stamps over a **minimum 18-month duration from the date of software implementation**>  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **BEFORE** using the solution | **AFTER** using the solution | Productivity gain |
| Description of the task | <EXAMPLE: Need to manually generate report from multiple sources. Takes 8 hours (or 480 minutes) to prepare report.>  | <EXAMPLE: Customised reports consolidating data from multiple sources can be generated from the system reducing manual data gathering.> | NA |
| Time spent on task | <EXAMPLE: 480 minutes> | <EXAMPLE: 15 minutes> | <EXAMPLE: (Before – After)/ Before x 100 = (480-15) / 480 x 100 = 96.9%> |

B. Problems encountered and solutions/recommendations

|  |
| --- |
| 1. Describe any challenges faced e.g. implementation of solution, usage, grant application, etc.
 |
| Click or tap here to enter text. |
| 1. Actions or steps taken to overcome challenges.
 |
| Click or tap here to enter text. |
| 1. Please state the benefits, if any, brought about by the project to other aspects of your organisation. (e.g. clearer communications, better staff morale)
 |
| Click or tap here to enter text. |

C. Declaration

I declare that the information of the project as described in the above report is true and to the best of my knowledge.

|  |  |
| --- | --- |
| Click or tap here to enter text.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name and Signature of Proprietor/ Managing Director/ Managing Partner | Click or tap here to enter text.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date |
| Click or tap here to enter text.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Company Name and Stamp (if available) |  |