**6-MONTH REPORT**

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| --- | --- |
| **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)  Internal Audit Management  Taxation Management  Corporate Secretariat Management  Practice Management  Data Analytics  Business Advisory Tools |
| Solution name | Click or tap here to enter text. |
| Solution vendor | Click or tap here to enter text. |
| Claim Period (of current claim) | 1 |
| Period of Reporting | <DD-MM-YY to DD-MM-YY> |
| Grant Percentage | <50% or 30%> |
| Grant Quantum | $30,000 |
| Amount of funds utilised (disbursed) to-date | Click or tap here to enter text. |
| Grant balance  (unreleased amount) | Click or tap here to enter text. |

A. Outputs achieved

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| --- | --- |
| Usage report (at least 1 month) | <insert attachment e.g. downloaded from system/screenshot of usage> |

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| --- | --- | --- | --- |
|  | **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: Only need 15 minutes to prepare report> | 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

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| --- |
| 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.

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| 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) |  |