

**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	
<p><b>Summary of the event</b></p> <p><b>*please include:</b></p> <ul style="list-style-type: none"> <li>- Date</li> <li>- Venue</li> <li>- No. of attendees</li> <li>- Highlights of event</li> <li>- Objectives achieved</li> </ul> <p><b>in paragraph with around 150 words</b></p>	
<p>Describe what you would do differently to improve the event if you were doing it again</p>	
<p>Other comments (if any)</p>	
<p>Please also send 2-4 photos with resolution of 5MB or above.</p>	

***I give Morningside College permission to use and/or publish the content and/or photos that I submitted in this report.***

## Financial Statement

### Expenditure

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

\*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):				
<p>* Please be reminded to collect all cost involved of the activity from Non-MC students unless otherwise specified.</p>				