**Next Generation Cancer Research Fellowship**

**Financial Reporting**

The Administering Institutions of Cancer Council Queensland Next Generation Cancer Research Fellowships must submit the following financial reports in accordance with the Reporting Requirements:

* an Annual Income and Expenditure Statement in respect of the previous calendar year of the project, by **28 February the year following each Funding Year** (other than the first and Final Funding Years)
* a Financial Acquittal Statement in respect of the whole project, by **30 April** following the end of the Final Funding Year.

Statements should be certified by the appropriate, authorised person within the Administering Institution (i.e. Chief Financial Officer), to the effect that the research specified in the fellowship has been performed, and that the money has been expended solely upon the research project for which it was requested.

|  |
| --- |
| **Please select report type:** |
| [ ]  | Annual Financial Report for year: Choose an item. |
| [ ]  | Financial Acquittal Statement (End of fellowship) |

|  |  |
| --- | --- |
| **Fellowship Application No:**  | Click or tap here to enter text. |
| **Title of Research:**  | Click or tap here to enter text. |
| **Fellow:**  | Click or tap here to enter text. |
| **Administering Institution:** | Click or tap here to enter text. |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Choose an item. **($)** | Choose an item. **($)** | Choose an item. **($)** | Choose an item. **($)** | Choose an item. **($)\*** | **Total****($)** |
| **INCOME** |  |  |  |  |  |  |
| *Balance brought forward from previous year if applicable*  |  |  |  |  |  |  |
| Fellowship income from CCQ |  |  |  |  |  |  |
| Total Funds available: |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **EXPENDITURE** |  |  |  |  |  |  |
| Salary |  |  |  |  |  |  |
| Maintenance |  |  |  |  |  |  |
| Travel *(these are examples only)* |  |  |  |  |  |  |
| Total Expenditure: |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| *Funds carried forward to next year if applicable* |  |  |  |  |  |  |

*\*add more columns as needed*

**Signature of appropriate, authorised person**

I certify that the accounts and records on which this statement has been prepared were properly maintained in accordance with Australian Accounting Standards.

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Name and Position Title Signature