附件3

**年度舟山市普陀区**

**公益创投项目中期进度表**

**项目名称：**

**项目实施单位：**

**填报日期：**

普陀区社会组织公共服务中心

**填 表 说 明**

1．本表由申报项目的社会组织负责填写，在项目有关阶段按时填报，填写内容必须客观真实、严谨明确，逐项填写，全面反映申报项目的进展情况。填写含糊不清、字迹潦草及缺少相关证明材料的不予受理。

2．所有数据项（资金、人、人次）需填报项目开展至当前阶段累积数。

3.填报过程中如有疑问，请及时咨询项目中期评估相关项目负责人。

4．表中栏目如不符实际填写需求，可自行增减行。

5．没有的事项请填写“无”或“零”。

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| 项目名称 | | | |  | | | | | | | | | | | | | |
| 实施单位 | | | |  | | | | | | | | | | | | | |
| 项目负责人 | | | |  | | | | 联系电话 | | | |  | | | | | |
| 完成时间 | | | |  | | | | 是否按计划完成 | | | | | | | □是 □否 | | |
| 未按计划完成原因 | | | |  | | | | | | | | | | | | | |
| 至本阶段项目完成情况  （包括项目具体开展实施情况，人力、物力、财力投入情况和  取得的效果，请附相关证明材料） | | | | | | | | | | | | | | | | | |
| **资金支出情况** | **支出类别（合计）** | | | | | | **金额（元）** | | | | | | **支出完成进度比（%）** | | | | | |
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| **项目服务实施情况** | （1）项目总预计服务人数\_\_\_人 | | | | | | | | | | | | | | | | | | | |
| （2）项目中期预计服务人数\_\_人 | | | | | | | | | | | | | | | | | | | |
| （3）项目中期实际服务人数\_\_\_人 | | | | | | | | | | | | | | | | | | | |
| （4）项目中期实际完成比例\_\_%  【计算公式：计算结果=第（3）项/第（2）项】 | | | | | | | | | | | | | | | | | | | |
| **宣传总结情况** | **媒体报道** | | | 媒体名称 | | | | | | | 报道日期及主要内容 | | | | | | | | | |
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| **报送简报** | | | 日期 | | | | | | | 主要内容 | | | | | | | | | |
| 无 | | | | | | |  | | | | | | | | | |
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| **项目实施情况** | | | | | | | | | | | | | | | | | | | | |
| **已开展服务情况** | **时间** | | | **地点** | | **项目实施内容** | | | | | | | | | | **参与对象及人数** | | | | |
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| **下步服务安排** | **预计时间** | | | **项目实施内容** | | | | | | | | | | | | | | | | |
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| **项目执行中的问题和建议** | 问题： | | | | | | | | | | | | | | | | | | | |
| 建议： | | | | | | | | | | | | | | | | | | | |
| **项目资金使用详细情况** | | | | | | | | | | | | | | | | | | | | |
| **预计受益人数** | | |  | | **已受益人数** | | | |  | | | | | | | | | | |
| **立项经费** | | |  | | **已使用经费** | | | |  | | | | | **是否变更** | | |  | | |
| **子项目** | | **费用类型** | | **支付内容** | | | | | | **支付金额** | | | | **凭证号** | | | | | |
| 例：子项目一 | | 人员经费 | | 讲课费 | | | | | |  | | | |  | | | | | |
| 咨询费 | | | | | |  | | | |  | | | | | |
| 志愿者补贴 | | | | | |  | | | |  | | | | | |
| 社工服务费 | | | | | |  | | | |  | | | | | |
| 子项目二 | | 宣传费 | | 印刷费 | | | | | |  | | | |  | | | | | |
| 子项目三 | |  | |  | | | | | |  | | | |  | | | | | |
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| …… | |  | |  | | | | | |  | | | |  | | | | | |
| 费用合计（大写）： （小写）： | | | | | | | | | | | | | | | | | | | |

制表： 审核： 审批： 填表日期：