



Monthly Report
of Religious Bodies in Receipt of Grant
Funding to Support the Food Distribution
Efforts for COVID-19

INSERT NAME OF RELIGIOUS BODY



Report for the Month of (month and year):
Submitted on: (date)
Submitted by:

*This form must not be amended or altered in any way.
OPM 2020*

IMPORTANT NOTES

1. A combined monthly report must be submitted to the Office of the Prime Minister two (2) days after the last day of the previous month. The monthly report consists of the following three (3) documents.
 - a. This main summary reporting form
 - b. Form 1 – Expenditure Report
 - c. Form 2 – Beneficiary Register

2. A report must be submitted by the parent/head religious body **and all** its affiliated bodies. For clarification:

Independent bodies must also submit a report. An *independent body* means a religious group that may not fit distinctly into the major religious groups, and is not overseen or supervised by the major umbrella bodies of one of the major religious groups. An independent body may also have a parent body and affiliates as well. In this case, **both** the independent parent and affiliated body must submit the required combined monthly report.

3. Please submit a hard copy of the Monthly Report addressed to:

**The Permanent Secretary
Office of the Prime Minister
13-15 St Clair Avenue
Port of Spain
Trinidad
Attention: Sr. Monitoring & Evaluation Officer**

4. In addition to submitting hard copies, please submit an electronic copy of the completed report to the Senior Monitoring and Evaluation Officer via email opm-gca.me@gov.tt by the deadline date as highlighted by the Reporting Schedule below.

REPORT PERIOD	SUBMISSION DATE TO THE OFFICE OF THE PRIME MINISTER
JULY 2021	June 30, 2021

5. Notice of receipt will be sent to your organisation for both copies.
6. You are required to attach and submit copies of all invoices and receipts regarding the purchasing of food items from the grant funding. These invoices and receipts should clearly state the items and quantities that was purchased.
7. You are welcome to attach any information that you deem as necessary information to the OPM regarding the grant provision, which may include challenges faced, explanations for certain anomalies etc.
8. For further clarification and assistance, the Senior Monitoring and Evaluation Officer can be contacted at 622-1625 ext 4283 or via email at opm-gca.me@gov.tt.

I. SUMMARY

1. **To be completed by parent bodies only.** Number of affiliated bodies (churches/masjids/temples/mandirs/mosques/other) under the supervision of the parent body (this number should be the same number provided in Section II): _____

2. **To be completed by parent bodies only.** Overall membership of religious body (this number should include ALL the members of affiliated bodies under the parent body's management, including the congregation members in the parent's specific location. It should be the same number provided in Section II): _____

3. **To be completed by parent and affiliated bodies.** Number of congregation members in your specific religious body/location _____

II. FINANCIAL REPORTING

Disbursement of Grant Funding

This sub-section is to be completed by parent bodies only.

Fill in the table below with the names of all affiliated bodies under your supervision, and record how much money was disbursed to each one. Also record the number of members for each affiliated body. The number of affiliated bodies and the total membership must correspond with the numbers quoted in questions 1 and 2 in Section I. Please add more rows as needed and add the month in the last column.

No.	Name of Affiliated Body	Number of Members in Each Affiliated Body	Amount Disbursed Month of [] 2020 (\$)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			
26.			
27.			
28.			
29.			
30.			

No.	Name of Affiliated Body	Number of Members in Each Affiliated Body	Amount Disbursed Month of [] 2020 (\$)
31.			
32.			
33.			
34.			
35.			
36.			
37.			
38.			
39.			
40.			
Totals	_____ bodies	_____ members	\$

Expenditure of Grant Funding

This sub-section is to be completed by parent and affiliated bodies.

Both bodies will report on the funds used for the community in which they are located. Please use the table below to report on how the grant was spent during the stated period. Complete this section alongside FORM 1 - the detailed EXPENDITURE REPORT. This overview should reflect the expenditure in Form 1.

1. REVENUE	Month of []
Balance brought forward from the grant from the previous month	\$0
Office of the Prime Minister Grant for current month	\$
Grand Total Revenue	\$
2. EXPENDITURE	AMOUNT
Disbursements to Affiliated Bodies for the current month (if applicable)	\$
Expenditure at your location for the current month	\$
Grand Total Expenses (Disbursements + Location Expenditure)	\$
3. BALANCE	AMOUNT
Grand Total Revenue – Grand Total Expenditure	\$

III. SUMMARY OUTPUT REPORTING

This section is to be completed by both parent and affiliated bodies.

Please complete the blanks and table below. Parent bodies will report on the hampers distributed in their specific location. Attach FORM 2 – the BENEFICIARY REGISTER to this report.

- Number of hampers distributed: _____
- Number of other forms of food support distributed: _____

3. Demographics of the persons receiving food support:

(complete table below)

Summary Information

Description	Number
Number of families receiving food support	
☐	
☐	

A Note on FORM 2

In accordance with the Agreement, this form collects information on the number of persons receiving the benefits under the agreement. This form should be printed and kept at your distribution site, in order to capture the information requested. Print as many of these forms as you need to capture the information on beneficiaries.

IV. OTHER INFORMATION

This section is to be completed by both parent and affiliated bodies.

Please tell us how you advertised or announced the availability of the grant/food support by the Office of the Prime Minister. Please check all that apply.

- Website Source and date *e.g., OPM website- May 2, 2020*
- Press Release Source and date _____
- Newspaper/Other Publication Source and date _____
- Audio Source and date _____
- Video Recording Source and date _____
- Advertisements Source and date _____
- Social Media Source and date _____
- Other forms of internal/external communication Source and date _____

V. SUBMISSION OF REPORT

Name of person preparing report (Block Letters)			
Position or Title			
Phone(s)		Email	
Signature		Date	

Stamp of Religious Body:

Place stamp here