

CANADIAN INSTITUTES OF HEALTH RESEARCH INSTITUTE SUPPORT GRANT ANNUAL FINANCIAL REPORT

Important Notice: A signed Annual Financial Report for each Institute Support Grant must be filed annually by June 30 (As stated in the Agreement on the Administration of Agency Grants and Awards by Research Institutions)

Institute		Scientific Director	D	ate	Year Ending
Institution			U	niversity Account No.	Grant No.
SOURCES (OF FUNDS				
	rant at close of previous y	ear	I\$		
Current year funding					
Deduct funds transferred to other CIHR Institute(s)			\$		
Add funds transferred from other CIHR Institute(s)					
	available for current year		\$	Α	\$ 0.00
	IRES INCURRED FOR CU				<u> </u>
	Development				
a) Conference, symposia and workshops			\$		
b) Institute Advisory Board expenditures			\$		
c) Professional Services			\$		
d) Travel Expenditures			\$		
6) (e) Other costs (provide description) \$				
				Subtotal	\$ 0.00
2) Salary an	nd Benefits of the Scientific	Director			
		Director	10		
a) Salary \$ b) Fringe Benefits \$					
C) S	Sabbatica//Administrative L	.eave	\$	Cubtotal	f 0.00
				Subtotal	\$ 0.00
2) Inatituta (Onerations				
3) Institute Operations					
a) Employee salaries			\$		
b) Employee benefits			\$		
c) Severance pay			\$		
	Office accommodations		\$		
e) Telephone and communication services			\$		
f) Supplies, material and other services			\$		
g) Office furniture and fixtures			\$		
h) Computer equipment and IT support			\$		
i) Professional services \$					
	ravel expenditures		\$		
k) Translation costs			\$		
I) O	ther expenditures		\$		
			•	Subtotal	\$ 0.00
4) Renovation	on Costs				\$
Total expenditures incurred for current year B					\$ 0.00
UNSPENTE	BALANCE			A-B	\$ 0.00
SIGNATURE	S				
I hereby certify that the above statement is correct, that the expenditures conform to the general conditions and regulations governing the grant as outlined in the Institute Support Grant Agreement, and for the purpose for which the grant was made. I hereby certify that the expenditure above were incurred and paid with grantee, and that the supporting available for monitoring purpose.					vholly on behalf of the g documents are
	Scientific Director			Financial Officer	
Date			Date	9	