**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** | **Date** | **Year Ending**
---|---|---|---

<table>
<thead>
<tr>
<th><strong>Institution</strong></th>
<th><strong>University Account No.</strong></th>
<th><strong>Grant No.</strong></th>
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</thead>
</table>

**SOURCES OF FUNDS**
- Balance of grant at close of previous year $0.00
- Current year funding $0.00
- Deduct funds transferred to other CIHR Institute(s) $0.00
- Add funds transferred from other CIHR Institute(s) $0.00
- **Total funds available for current year** A $0.00

**EXPENDITURES INCURRED FOR CURRENT YEAR**

1) Institute Development
   - a) Conference, symposia and workshops $0.00
   - b) Institute Advisory Board expenditures $0.00
   - c) Professional Services $0.00
   - d) Travel Expenditures $0.00
   - e) Other costs (provide description) $0.00
   - **Subtotal** $0.00

2) Salary and Benefits of the Scientific Director
   - a) Salary $0.00
   - b) Fringe Benefits $0.00
   - c) Sabbatical/Administrative Leave $0.00
   - **Subtotal** $0.00

3) Institute Operations
   - a) Employee salaries $0.00
   - b) Employee benefits $0.00
   - c) Severance pay $0.00
   - d) Office accommodations $0.00
   - e) Telephone and communication services $0.00
   - f) Supplies, material and other services $0.00
   - g) Office furniture and fixtures $0.00
   - h) Computer equipment and IT support $0.00
   - i) Professional services $0.00
   - j) Travel expenditures $0.00
   - k) Translation costs $0.00
   - l) Other expenditures $0.00
   - **Subtotal** $0.00

4) Renovation Costs $0.00

**Total expenditures incurred for current year** B $0.00

**UNSPENT BALANCE**
- **A-B** $0.00

**SIGNATURES**

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.

____________________________  ______________________________
Scientific Director  Financial Officer

____________________________  ______________________________
Date  Date