



PUNJAB WELFARE TRUST FOR THE DISABLED

704-708, 7th Floor, Al-Qadir Heights, 1-Babar Block, New Garden Town, Lahore Ph: 042-35847861-3, Fax: 042-35847866

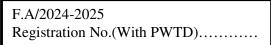
<u>APPLICATION FOR FINANCIAL ASSISTANCE FOR THE YEAR: 2024-2025</u> (FOR PWTD ASSISTED NGOs)

PART-I

BASIC INFORMATION/PARTICULARS OF APPLICANT NGO

NAME OF NGO:				
ADDRESS:				
	Cit	y/Town _		
Tehsil:	Dis	strict:		
Telephone Land line #: Mobile:				
E-Mail :				
Authorised Contact	Person with Mobile #:	!		
REGISTRATION W	ITH PUNJAB SOCIAL	WELFA	RE DEPARTMENT:	
i) Registration No./Date/Year of Registration:				
ii) <u>Updated Renewal Certificate</u> :				
(For the Period from:To				
ttach copy of Registratio	n Certificate-Annex.1)			
Field of Disabilities: (Which is applicable)			No. of Beneficiaries (2022-23)	
	ii)			
	iii)	-		
	iv)			
Incase of Health Facil	ities/Hospital:	i)	Number of OPD Patients	
		ii)	Number of Surgeries	
	Tehsil: Telephone Land line E-Mail: Authorised Contact REGISTRATION W i) Registration No./I ii) Updated Renewal (For the Period from the P	ADDRESS:	Tehsil:	

EXEMPTED



NOT EXEMPTED



5. TAX STATUS U/S 159(1), ITO

*	(If exempted from tax, attach copy of the currently valid tax exemption Certificate/Notification) — <u>Annex.2</u>
6.	AIMS & OBJECTIVES OF NGO:
*	(Attach copy of the Memorandum and Articles of Association, Bye Law/Regulations) Annex. 3
7.	CURRENT ACTIVITIES AND PROJECTED PROGRAMMES:
a.	
b.	
c.	-
d.	
e.	
8.	MAJOR ACHIEVEMENTS TO DATE:

- * (Attach copy of each of Annual Operations & Activities Report for the last two years) Annex. 4
- 9. PARTICULARS OF MEMBERS MANAGING/EXECUTIVE COMMITTEE:

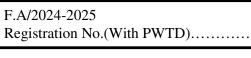
^{* (}Attach sheet containing names, addresses, bio-data and Phone numbers of the Managing/Executive Committee Members- Annex. 5)



PART-II

FINANCIAL STATUS (As of the last date of the previous year)

1. <u>'</u>	TANGIBLE ASSETS		
S. NO.	DESCRIPTION	VALUE	%
a.	Land Agriculture Commercial		
b.	Building Residential Commercial		
c.			
d.			
e.			
f.			
	TOTAL:		
2.	OTHER ASSETS		
S. NO.	DESCRIPTION	AMOUNT (Rs.)	%
a.			
b.			
c.			
d.			
e.			
	TOTAL:		
3. <u>1</u>	LIABILITIES		
S. NO.	DESCRIPTION	AMOUNT (Rs.)	%
a.			
b.			
c.			
d.			
e.			
	тоты.		





4. <u>INCOME (LAST FINANCIAL YEAR)</u>

C NO	DECCRIPTION	AMOUNT(Da)	07
S. NO.	DESCRIPTION	AMOUNT(Rs.)	%
a.	Property Income		
b.	Business Income		
c.	Investment Income		
d.	Grants from Governmental, Non Governmental, Domestic and International Donor Bodies/Agencies (Add details)		
e.	Donations raised from sources other than mentioned at Para 'd' above)		
f.	Fee from the Beneficiaries		
g.	Any other source (Add Details)		
h.	Financial Assistance Received from PWTD		
i.	Any other Grant Received from PWTD		
	TOTAL		
* Attac	ch details of Donations and Grants – Annex. 6		

5. <u>EXPENDITURE (LAST FINANCIAL YEAR)</u>

S. NO.	DESCRIPTION		AMOUNT(Rs.)	%
a.	Salaries			
b.	Admin Expenses			
c.	Transport / Utilities			
d.	Miscellaneous (Add details)			
		Sub Total:		
e.	Welfare Expenditure (Add details)			
	I	TOTAL:		

*	Attach an attested copy each of the audited Income & Expenditure Accounts for the last two years together with a brief statement showing the major sources of income and major items/heads of expenditure – $\underline{\mathbf{Annex.7}}$
*	Attach an attested copy each of the audited Balance sheets for the last two financial years and upto-date Fixed Assets Schedule – $\underline{\textbf{Annex. 8}}$
6	Whether Assistance for Capital Expenditure received Ves No

If yes amount of Assistance: Rs	and
Nature of Project	



PART-III

ASSISTANCE REQUESTED FOR THE YEAR JULY 2024 – JUNE 2025

1.	<u>PF</u>	ROPOSED EXPENDITURE	
	a.	Services	
	b.	. Administrative and supervisory	
	c.	Welfare (Add details)	
		Total:	
2.	PR	ROPOSED FUNDING	
	a.	Contribution by the NGO:	
		Cash	
		Kind	
	b.	. Income from the services provided	
	c.	Community Contribution	
	d.	Donations	
	e.	Fees from the beneficiaries	
	f.	Other	
		Total:	
Cı	ırre	rent contribution by PWTD	

3. FOR NEW PROJECTS ONLY

* In case of new projects, detailed proposed along with feasibility – Annex. 9

DESIGNATION



CHECK LIST OF DOCUMENTS TO BE ATTACHED

Please ensure the following documents are attached.					
Annex −1	Covering Letter from NGO (On their Letter Head/Pad).				
Annex –2	Application Form (Latest from PWTD).				
Annex −3	Certificate of Re	egistration from Social	Welfare Department.		
Annex –4	If enjoying tax-e	exemption status, (The	currently valid relevant certificate/ notification);		
Annex –5	Memorandum/A	articles of Association.	(One Time Activity).		
Annex –6	Annual Operations and Activity Report for last one year.				
Annex –7	Bio-data of Managing Committee members (One Time Activity/Changeable).				
Annex –8	Detail of the dor	nation from PWTD.			
Annex –9	Audited Income	and Expenditure Acco	unts for the last one year.		
Annex –10	Audited Balance	Sheet for the last one	year.		
Annex –11	Lists of staff.				
Annex –12	Lists of benefici	aries.			
Annex –13	Renewal/Latest	Certificate of Registrat	ion from Social Welfare Department		
Annex –14	Registration Cer	tificate from Punjab C	harity Commission		
complete. I	understand, if for	and to be otherwise, re-	he information furnished in this form is true and sponsibility for the consequences will be entirely this application shall be accepted by me.		
Date:					
	day month	year	SIGNATURE		
			NAME IN BLOCK LETTERS		