
REPORTING GUIDE AND FORMATS

EYC-100 QUARTERLY PROGRAM PERFORMANCE REPORT

EYC MALAWI Quarterly Program Performance Report Format (FORM100)

| | |
|--|--|
| Project Name: | |
| Reporting Period: | |
| Obligation Funding Amount: | |
| Project Duration: | |
| Evaluation Dates: | |
| Person Responsible for Drafting this Report: | |
| Project Objectives: (Taken from your project document) | |

I. Overall Progress of the Project for the Quarter

Briefly describe key **activities** and progress achieved during the reporting period as per the work plan. Officer should indicate how the month/quarter's activities compare with what had been planned for the month/quarter (this can be summarized in table format to show what activities had been planned and which were actually accomplished). Comment on to what extent the project is achieving its objectives and reaching targets. Comment on sustainability efforts.

II. Challenges, Solutions and Actions Taken

Describe the current and potential challenges, problems and potential solutions identified. For example, explain why scheduled activities were delayed or not carried out (this can be summarized in table format to show challenges and solutions/actions taken). These may include those related to partners or stakeholders, or other external factors.

III. Lessons, Best Practices and Recommendations

If applicable: very brief, no more than one page

IV. Success Stories

If applicable: very brief, no more than one page

V. Management Issues

Provide any key management, budget, personnel, or administrative issues that need to be relayed to EYC.

VI. Update of the PMP

Briefly discuss of the monitoring and evaluation activities conducted during the reporting period including dates and results of any evaluations undertaken. In addition, partners should include information regarding achievement of project goals and objectives, and where necessary, why those goals and objectives are not being met.

VI. Planned Activities for Next Month/quarter

Provide a list and timeline for major activities, events, and interventions for the next month/quarter. Please also indicate whether you expect that EYC participation may be requested.

EYC
 ANNUAL or FINAL Report Format (FORM200)

| | |
|--|--|
| Project Name: | |
| Reporting Period: | |
| Obligation Funding Amount: | |
| Project Duration: | |
| Person Responsible for Drafting this Report: | |
| Project Objectives: (Taken from your project document) | |

OVERVIEW: The annual and final results reports shall emphasize quantitative as well as qualitative data that reflect results, measure impact using the baseline data and indicators established for the program, and shall, at a minimum, include the following:

- i. Number of beneficiaries targeted, during the reporting period
- ii. Number of beneficiaries reached, during the reporting period
- iii. Cumulative number of beneficiaries targeted, to date
- iv. Cumulative number of beneficiaries reached, to date
- v. Total numbers of beneficiaries targeted and reached to date
- vi. A description of assessments and surveillance data used to measure results;
- vii. Success stories and an explanation of successes achieved, constraints encountered, and adjustments made for achieving program objective;
- viii. A discussion of the overall performance of the project including details of any discrepancies between expected and actual results and any recommendations for improving the design of the program
- ix. Overall cost effectiveness, with particular attention paid to cost savings and/or cost overruns, and other significant cost impacts such as major exchange rate fluctuations or other types of inflation shall be detailed;
- x. I. Overall Progress of the Project for the Year -Briefly describe key activities and progress achieved during the reporting period as per the work plan. Partner should indicate how the year's activities compare with what had been planned for the year (this can be summarized in table format to show what activities had been planned and which were actually accomplished). Comment on to what extent the project is achieving its objectives and reaching targets. Comment on sustainability efforts.
- xi. Challenges, Solutions and Actions Taken - Describe the current and potential challenges, problems and potential solutions identified. For example, explain why scheduled activities were delayed or not carried out (this can be summarized in table format to show challenges and solutions/actions taken). These may include those related to partners or stakeholders, or other external factors.
- xii. Lessons, Best Practices and Recommendations - If applicable: very brief, no more than one page
- xiii. Success Stories - If applicable: very brief, no more than one page

- xiv. Management Issues - Provide any key management, budget, personnel, or administrative issues that need to be relayed to EYC.
- xv. Update of the PMP - Briefly discuss of the monitoring and evaluation activities conducted during the reporting period including dates and results of any evaluations undertaken. In addition, partners should include information regarding achievement of project goals and objectives, and where necessary, why those goals and objectives are not being met.
- xvi. Planned Activities for Next Year - Provide a list and timeline for major activities, events, and interventions for the next month/quarter. Please also indicate whether you expect that EYC Director participation may be requested.

Purpose of Reporting

In order to make timely submissions to EYC, the center coordinator is kindly requested to utilize the report formats issued by other EYC Project Officers.

This Attachment includes the following report formats.

| Report Form Ref | Report Name |
|------------------------|--|
| 001 | Bank Information |
| 002 | Cash Advance Request (Monthly) |
| 003 | Advance Liquidations (Monthly) |
| 004 | Cost Share/Leverage Reporting (Quarterly) |
| 005 | VAT Tax Reporting Annual (and Foreign Tax Reporting) |
| 006 | Inventory List |
| SF-425 | Quarterly Financial Reporting (Cumulative) |
| 100 | Quarterly Progress Reports |
| 200 | Annual Report |
| | Final Report |

The following report templates will be supplied by EYC.

| Report Form Ref | Report Name |
|------------------------|---|
| 101 | Monitoring and Evaluation (M&E) Indicator Reporting (Quarterly) |
| 102 | Environmental Reporting (Quarterly) |

TO: EYC FINANCE AND ADMINISTRATION MANAGER

FROM: [INSERT NAME OF PERSON SUBMITTING FORM]

[INSERT PROJECT TITLE]

SUBJECT: BANK INFORMATION, EYC FORM #001

DATE: [INSERT DATE AS MM/DD/YYYY]

CC: EYC EXECUTIVE DIRECTOR

INSTRUCTIONS: Please complete the bank details below and return by email to the Finance and Administration Manager at eyeofthechild@malawi.net. EYC requires this information in order to expedite payment requests. **DUE DATE: This form (EYC-F-001) is due on or before 15 day of the month. Please note that EYC will not be able to wire advances to your Office until we have your bank information on file**

Section 1. Bank Details

All Recipients should complete this Section related to bank details for Malawi Kwancha and United States Dollars, if applicable. Insert "N/A" if "not applicable" to your organization.

| | Malawi Kwancha Account | USD Account | |
|--|------------------------|-------------|------------------|
| Name of Bank: | | | |
| Bank Number: | | | |
| Branch Name: | | | |
| Branch Number: | | | |
| Name of Bank Account: | | | |
| Bank Account No.: | | | |
| Swift Code No.: | | | For EYC Use Only |
| Our signature to the right indicates that this account is a separate bank account opened exclusively for the deposit and withdrawal of Center funds | | | |
| This account is interest bearing. [If it is not, please attach a memo explaining why it is not.] | | | |
| Memo attached? Yes or N/A | | | |

/end

TO: EYC FINANCE AND ADMINISTRATION MANAGER

FROM: [INSERT NAME OF PERSON SUBMITTING FORM]

[INSERT PROJECT TITLE]

SUBJECT: REQUEST FOR ADVANCE FORM #002

DATE: [INSERT DATE AS MM/DD/YYYY]

CC: EYC EXECUTIVE DIRECTOR

REQUEST FOR ADVANCE
EYC FORM #002
Please complete Form EYC-002 for each currency being requested.

1. Check One of the Following:

Malawian Kwacha (MK) United States Dollars (USD)

2. Check One of the Following:

ADVANCE REIMBURSEMENT

3. Check One of the Following:

FIRST REQUEST SUBSEQUENT REQUEST **FINAL REQUEST**

4. Payment Details:

CHECK WIRE TRANSFER OTHER:

4. Indicate the Period(s) Covered by This Request. Each period must be 30 or less days.

| | Start Date (mm/dd/yyyy) | End Date (mm/dd/yyyy) |
|------------|----------------------------|--------------------------|
| 1st Period | | |
| 2nd Period | | |

6. Certification

| | | |
|---|---|---------------------------|
| | SIGNATURE OR AUTHORIZED CERTIFIED OFFICIAL | DATE REQUEST SUBMITTED |
| I certify that to the best of my knowledge and belief that the data presented in Sections 1 through 5 of this Form are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested. | | |
| | TYPED OR PRINTED NAME | CONTACT INFO |
| | | |

For internal use only:

REVIEWED BY: EYC Finance Manager _____ **Date:** _____ mm/dd/yyyy

Request No: _____

Obligated Funds: _____

Obligated Funds Remaining: _____

Total Agreement Value: _____

Agreement Remaining Balance: _____

OK, Separate Bank Account Not OK, See Remarks Section

YES, Interest Bearing Bank Account No, See Remarks Section

Agreed with 6G

Did not agree with 6G or Discrepancy Noted, See Remarks Section

REVIEWED BY EYC M&E Manager: _____ **Date:** _____ mm/dd/yyyy

OK, Reports have been submitted HOLD Payment, See Remarks Section

REVIEWED BY EYC Senior Technical Advisor: _____ **Date:** _____ mm/dd/yyyy

OK, Reports have been submitted HOLD Payment, See Remarks Section

REVIEWED BY: EYC Agreement Specialist _____ **Date:** _____ mm/dd/yyyy

REVIEWED BY: EYC Executive Director _____ **Date:** _____ mm/dd/yyyy

REMARKS SECTION: (Please indicate your name, title, and date (mm/dd/yyyy) in [] following each remark.)

/end

LIQUIDATION OF ADVANCES OR REIMBURSEMENT REQUEST FORM

TO: EYC FINANCE AND ADMINISTRATION MANAGER

FROM: [INSERT NAME OF PERSON SUBMITTING FORM]

[INSERT PROJECT TITLE]

DATE: [INSERT DATE AS MM/DD/YYYY]

CC: EYC EXECUTIVE DIRECTOR

SUBJECT: LIQUIDATION OF ADVANCES OR REIMBURSEMENT REQUEST

1. Check One of the Following:

ADVANCE REIMBURSEMENT

2. Check One of the Following:

FIRST SUBSEQUENT FINAL

3. Check One of the Following:

KWANCHA USD

4. Reconciliation of Funds:

| (Amounts Reported in _____ Currency _____) | | | | | |
|--|---|--------------------------------------|---------------------------|---------------------------|--|
| 4 | Reconciliation of Funds | I Previously Reported | II This Period | III Cumulative | NOTES |
| A | Cash on hand at beginning of period | | | \$ - | This figure should agree to Line 4F of previously submitted Form003 |
| B | Cash received by Recipient during current period | | | \$ - | ___FinMgr Confirmed Total |
| C | Cash available (Sum Lines 3A and 3B) | \$ - | \$ - | \$ - | |
| D | Cash disbursed during current period | | | \$ - | ___FinMgr Agreed to Details Submitted in Excel File (See Total in Column 4B Below) |
| E | Adjustment of prior periods (enter as a positive or negative) | | | \$ - | ___Mgr Confirmed or __N/A |
| F | Cash on hand at end of period | \$ - | \$ - | \$ - | |

4. CASH DISBURSEMENTS

NOTE – The Sub-Awardee should take the Excel formatted version of the final approved detailed budget presented in Attachment 4 of its Agreement and append the following column headers to the Excel file. The details reported below should tie to your accounting records for the Agreement. Please note that in accordance with your Agreement, EYC may visit your office to review supporting documentation.

(Amounts Reported in Kwacha US Dollars)

| | [A] | [B] | [C] | [D=A+B] | [E=A-D] | |
|--------------|--|--|---|---|-------------------|-------|
| Description | Final Approved Detailed Budget (as per Agreement Attachment 4) | Previously Reported mm/dd/yyyy to mm/dd/yyyy | Expenditures This Period mm/dd/yyyy to mm/dd/yyyy | Cumulative Expenditures From mm/dd/yyyy to mm/dd/yyyy [Inclusive of Current Period] | Remaining Balance | NOTES |
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| | | | | | | |
| TOTAL | | | | | | |
| | | | <i>4B</i> | | <i>4D</i> | |

5. Certification

| | | |
|---|--|-----------------------|
| | SIGNATURE OR AUTHORIZED CERTIFIED OFFICIAL | DATE REPORT SUBMITTED |
| I certify to the best of my knowledge and belief that a) this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents; | | |
| | TYPED OR PRINTED NAME | CONTACT INFO |
| | | |

For internal use only:

REVIEWED BY: EYC Finance Manager _____ **Date:** _____ mm/dd/yyyy

Request No: _____

Obligated Funds: \$ _____

Obligated Funds Available: \$ _____

Total Agreement Value: \$ _____

Agreement Remaining Balance: \$ _____

Agreed with 3F

Did not agree with 3F or Discrepancy Noted, See Remarks Section

REVIEWED BY EYC M&E Manager: _____ **Date:** _____ mm/dd/yyyy

OK, Reports have been submitted

HOLD Payment, See Remarks Section

REVIEWED BY EYC Senior Technical Advisor: _____ **Date:** _____ mm/dd/yyyy

OK, Reports have been submitted

HOLD Payment, See Remarks Section

REVIEWED BY: EYC Agreement Specialist _____ **Date:** _____ mm/dd/yyyy

REVIEWED BY: EYC Executive Director _____

Date: _____ mm/dd/yyyy

REMARKS SECTION: (Please indicate your name, title, and date (mm/dd/yyyy) in [] following each remark.)

/end

TO: FTCM FINANCE AND ADMINISTRATION MANAGER

FROM: [INSERT NAME OF PERSON SUBMITTING FORM]

[INSERT ADDRESS]

SUBJECT: COST SHARE/LEVERAGE REPORT

DATE: [INSERT DATE AS MM/DD/YYYY]

CC: EYC EXECUTIVE DIRECTOR

1. Check One of the Following:

- Malawian Kwacha (MK) United States Dollars (USD)
-

2. Check One of the Following:

- COST SHARE [GO TO SECTION 5 BELOW]
 LEVERAGING, when "Leveraging is checkmarked, then please also include the following information:

Name of Donor Whose Funds are Being Leveraged: _____

Cost Center Being Charged: _____

- Include a Memorandum describing lines cost shared against which Activities.

3. Check One of the Following:

- FIRST SUBSEQUENT **FINAL**
-

COST SHARE/LEVERAGE REPORT FORM

5. COST SHARE TRANSACTIONS ONLY – Not for leveraged Funds

NOTE – The Sub-Awardee should take the Excel formatted version of the final approved detailed budget presented in Attachment 3 of its Agreement and append the following column headers to the Excel file. The details reported below should tie to your accounting records for the Agreement or other supporting documentation, e.g. volunteer labor time cards or calculations, etc. Please note that in accordance with your Agreement, EYC may visit your office to review supporting documentation.

(Check One: Amounts Reported in Kwancha or US Dollars)

| | [A] | [B] | [C] | [D=A+B] | [E=A-D] | |
|--------------|-----------------------|--|---|---|-------------------|-------------------------|
| Description | Final Approved Budget | Previously Reported mm/dd/yyyy to mm/dd/yyyy | Expenditures This Period mm/dd/yyyy to mm/dd/yyyy | Cumulative Expenditures From mm/dd/yyyy to mm/dd/yyyy [Inclusive of Current Period] | Remaining Balance | Notes (How calculated?) |
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| | | | | | | |
| TOTAL | | | | | | |

6. Certification

| | | |
|---|--|-----------------------|
| | SIGNATURE OR AUTHORIZED CERTIFIED OFFICIAL | DATE REPORT SUBMITTED |
| I certify to the best of my knowledge and belief that a) this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents. | | |
| | TYPED OR PRINTED NAME | CONTACT INFO |
| | | |

COST SHARE/LEVERAGE REPORT FORM

For internal use only:

REVIEWED BY: EYC Finance Manager _____ **Date:** _____mm/dd/yyyy

Total Cost Share/Leverage: \$_____

Cost Share/Leverage Remaining Balance: \$_____

- Agreed with 5E
- Did not agree with 5E or Discrepancy Noted, See Remarks Section

REVIEWED BY EYC M&E Manager: _____ **Date:** _____mm/dd/yyyy

- OK, Reports have been submitted
- HOLD Payment, See Remarks Section

REVIEWED BY EYC Senior Technical Advisor: _____ **Date:** _____mm/dd/yyyy

- OK, Reports have been submitted
- HOLD Payment, See Remarks Section

REVIEWED BY: EYC Agreement Specialist _____ **Date:** _____mm/dd/yyyy

REVIEWED BY: EYC Director _____ **Date:** _____mm/dd/yyyy

REMARKS SECTION: (Please indicate your name, title, and date (mm/dd/yyyy) in [] following each remark.)