

Financial Reconciliation Return Form

MoEST, Bumula, Deworming Wave: NWR First 56 SCs In 10 Couties For Y3

Name:		
Date:		
Amount (Words):		
Notes:		

110103.

If you make any alterations to this return document, please cancel the original notation and counter-sign against the alteration. Do not use white-out.

Allowable costs MUST be approved by Innovations for Poverty Action before being incurred. Please contact us for approval. Once approved, indicate the specific nature of those expenses in the Remarks Section.

Advanced	Spent	Variance
4000		
1200		
500		
500		
500		
8000		
2400		
1000		
2000		
500		
500		
500		
338000		
2000		
35600		
26700		
16900		
200		
	1200 500 500 500 8000 2400 1000 2000 500 500 500 338000 2000 35600 26700 16900	1200 500 500 500 8000 2400 1000 2000 500 500 500 338000 2000 35600 26700 16900

DEO pays G4S Securicor or EMS Speedpost

	500	
	0	
	0	
	0	
Amount forwarded to your district	441500	
Total Amount Spent		
Amount Currently Held In District Account		

Prepared By: Approved By: Date: Date: Signature: Signature: