THE ASSESS SERVICES OTHER THAN PERSONAL UNALE AND MISSION TO UGANDA P. O. BOX 7856 KAMPALA, UGANDA P. O. BOX 7856 KAMPALA, UGANDA IL-017-IL-2020-MRRII PREHISTORER NAME AND ADDRESS MEARARA REGIONAL REFERRAL HOSPITAL P.O. BOX 40 MBARARA MBARARA IDSCOINT TE DATE INVOICE PAYERS INV. NUMBER AND DATE ARTICLES OR SERVICES OTY COST PER UNIT PRICE AMOUNT OF ORDIN Fixed Amount Reimbursement (FAR) Advance Request for the Months: Mar-21 Dr. Celestine Barigye Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. BERVICES ON PRICE AMOUNT OTY COST PER 2 Dr. Celestine Barigye Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person signs anywhere here include name, signature date. Authenticed person sign anywhere here include name, signature date. Authenticed person sign anywhere here include name, signature date. Authenticed person signature date. Authenticed	-						
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AND DATE OF ORDERS Fixed Amount Reimbursement (FAR) Advance Request for the Months: Dr. Celestine Barigue Associated person signs anywhere here include name, septement of the Months: PANMENT: PROVED FOR FARMENT APPROVED BY: APPROVED BY: APPROVED BY: (Amburited Person in the months is correct and proper for populous.) (Amburited Person in the subming corool in mr. I certify that this resulted is correct and proper for populous.) ACCOUNTING CLASSIFICATION ON ACCT. OF ILS. TREASURY ON ACCT. OF BARCLAY'S BANK (I) LTD.	1				UNIT	PRICE	AMOUNT
Fixed Amount Reimbursement (FAR) Advance Request for the Munitis: Dr. Celestine Barigye Authorized person signs asynchren kere: include name, eigenated state PO BOX 10	1	ARTICLES OR SE	RVICES	QTY			IN
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ON ACCT. OF U.S. TREASURY ON ACCT. OF BARCLAY'S BANK (U) LTD.			Cassin Cing				
SH	ECK NO.	ON ACCT. OF U.S. TREASURY		ON ACCT. OF	BARCLAY'S BAN	NK (U) LTD.	
	ЗН	DATE					

IMPLEMENTING PARTNER

ACTIVITY:

MBARARA REGIONAL REFERRAL HOSPITAL

services To strengthen the Mbarara Regional Referral Hospital for the delivery of HIV prevention, care and treatment

GRANT AWARD NUMBER: START DATE:

PAYMENT METHOD:

617-IL-2020-MRRH March 31, 2020 June 30, 2021

FIXED AMOUNT REIMBURSEMENT

ADVANCE REQUEST FOR THE PERIOD: | JAN - MARCH 2021

Balance of Grant Amount (A-B)

Expenditure Jan 2021 Projected

> Projected Expenditure Feb 2021

Projected Expenditure March 2021

Expenditure (D+E+F) Total Projected

22,699 27,814 51,730

3,411

3,711

Milestone Description Obligated Amount USD 45,398 55,628 51,730 2,005 1,151 2,229 3,411 2,034 2,462 4,204 Total Grants
Advanced

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TX_CURR

PFM-HR PFM-PMT

PFM-GOV2

PFM-ICT 2

PFM-RMF2 PFM-FAR2 PFM-GOV3

170,251 USD 10,113 18,096 7,844 139 USD 37,554 45,515 51,730 152,155 3,411 2,034 2,005 2,462 4,204 1,012 2,229 USD USD 11,349 13,907 51,730 84,108 3,411 3,711 USD 11,349 13,907 25,256

Actual Funds Advanced by USAID per Month

109,364

	3,630	3,030		3,020	3,650	3,785	3,785	
		3 550	3,650	1680				Totals UGX
68,492,214						68,492,214		Totals
18,096						18,096		
								PFM-ICT
							,	PFM FAR
								25.00-2500
								PF M-GGVV
								T Ber 30 T
								CA CID
139						139		PFM-PMT
								PFM-HR
								EID
7,844						7,844		TX PVLS
10,113						10,113		TX CURR
								HIS STH
USD	USD	USD	USD	USD	USD	usp	USD	Milestones
Total	Oct-20	Sep-20	Aug-20	Jul-20	Jun-20	May-20	Apr-20	

Appropriate refund to USAID will be made promptly upon request in the event of disallowance of costs not allowed under the terms of the agreement. That such detailed supporting information as USAID I certify to the best of my knowledge and belief that this report is true in all respects and all disbursments have been made in accordance with the purpose and conditions of the grant agreement.

may reasonably require will be furnished promptly to USAID upon request.

Names: NAHABWEBENB.

Signature Date 16/12/20

Names: Dr. Beungyl C

Title: Date 16112(2000)

Miserers Regional Referral Hospital Monthly Dicharacment Flan

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41,383.64	57103	0	May 2021	April 2021	FY2102	March 2021	January 2021 February 2021	January 2021	192101 83/10m1 698	thermittee 3020	Sanyantha 2000 Incombas 2020 Sub Frid FGX	Shotsker 3039	de l'imposes
Total	Sub-Total UGX	1031			V. V	The second secon						THE REAL PROPERTY AND ADDRESS OF THE PARTY ADDRESS OF THE PARTY ADDRESS OF THE PARTY AND ADDRESS OF THE PARTY ADDRESS OF THE PAR	A SPANS OF MANAGEMENT AND ADMINISTRATION OF THE PARTY OF

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2021 June 2021 Sub-Total Total Original	May 2021	Sub-Total Apr 2021 FY21Q2 Apr 2021	Mar 2021 S	Feb 2021	Jan 2021	Nub-Total UGX IN2101	Dec 2020	Nov 2020	O++ 2020	f age Arres

135X - Quarterly Cash Limits Summary

3

1,268,506,511	245,540,554	1,022,965,957		1	-	Total
777,040,508	115,490,835	661,549,673				Cost Reimbursement
491,466,003	130,049,719	361,416,284	-			Fixed Amount Reimbursement
Total	Apr-Jun 2021	Jan-Mar 2021	Oct-Dec 2020	Apr-Jun 2020 Jul-Sep 2020 Oct-Dec 2020	Apr-Jun 2020	Period

USD - Quarterly Cash Limits Summary

1						
347,536	67,271	280,265	•		•	Total
212,888	31,641	181,246	0	,		Cost Reimbursement
134,648	35,630	99,018	0		0	Fixed Amount Reimbursement
Total	Apr-Jun 2021	Jan-Mar 2021	Apr-Jun 2020 Jul-Sep 2020 Oct-Dec 2020	Jul-Sep 2020	Apr-Jun 2020	Period