

UNDP Registry Addis Ababa	
Received Date	10 9 JUL 2019
FILE	PRO/300110
ACTION	INFO
DAG	
ACTION	
COMPLETED	



Yonas Getahun
Regional Economic Cooperation
ON Agencies, CRGE Facility &
Directorate Director

Yours Sincerely,

Subject: Submission of Financial Report

DAG Coordinator
UNDP
Addis Ababa
Dear Sir/Madam,

Please find the financial report, FACE form for the expenditure of DAG Project for the second quarter of 2019 from phase IV development partner's support for GTP implementation project amounting Birr 45,276.00 (Forty Five Thousand Two Hundred Seventy Six only).

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77ኛው ሚኒስቴር
የፊደራል ሪፐብሊክ ኢትዮጵያ
የፋይናንስ ሚኒስቴር



ፋፕር Ref.No. UN-2/1/3
ቀን 08 JUL 2019
Date

Funding Authorization and Certificate of Expenditure

Country: Ethiopia

Programme Code & Title: Phase IV development partners support to the Implementation GTP //

Project Code & Title:

Responsible Officer (s):

Implementing Partner: Ministry of Finance

UN Agency: UNDP-DAG

Date: 08-Jul-19

Type of Request:

Direct Cash Transfer (DCT)

Reimbursement

Direct Payment

Coding for UNDP, UNEPA and WEP		Actual Project Expenditure		Expenditures Accepted by Agency		Balance		New Request Period & Amount		Authorised Amount		Outstanding Authorised Amount	
Account	Fund	A	B	C	D=A-C	E	F	G=D+F					
		42,851.25	37,950.00	37,950	4,901.25			4,901.25					
		28,567.15	7,326.00	7,326	2,124.15			2,124.15					
Total		71,418.75	45,276.00	45,276	26,142.75			26,142.75					

CERTIFICATION

The undersigned authorized officer of the above-mentioned implementing institution hereby certifies that:

The funding request shown above represents estimated expenditures as per AWP and itemized cost estimates attached.

The Actual expenditures for the period stated herein has been disbursed in accordance with the AWP and request with itemized cost estimates. The detailed accounting documents for these expenditures can be made available for examination, when required for the period of five years from the date of the provision of funds.

Date Submitted : July 8, 2019

Name:

Signature: _____

Title: Program Coordinator

Stamp: _____

NOTES: Shaded areas to be completed by the UN Agency and

FOR ALL AGENCY		FOR UNDP/UNFPA USE ONLY	
Account Changes	Liquidation information		
Cash Transfer reference:	DCT Reference:		
CRQ ref. No., Voucher ref. no.	CRQ ref. No., Liquidation ref. No.		
GL Codes:			
Training			
Meeting & Conferences			
Other Cash Transfers			
Total	Less:		
	Liquidation		
	Balance		
	Total		



[Handwritten signature]

Business Unit: ETH10
Voucher ID: 00118232
Voucher Style: Journal
Vendor: 0000004324
Name: MOFED UN-001
Location: 011
***Address:** 1 Q Advanced Vendor Search
 MOFED UN Monitoring & Evaluation
 MOFED
 Addis Ababa
 Addis Ababa - Ethiopia 1905OR1037
 ETH

Invoice Number: UN-2/1/3 2nd Qr fin. report
Invoice Date: 30/06/2019
Action: Run | Print Invoice
Pay Terms: 00 Immediate
Basis Dt Type: Inv Date
Comments(0)
Accounting Date: 09/07/2019
***Currency:** ETB
Total: 0.00
Difference: 0.00
Related Voucher: 00:117220
 Calculate
 Session Defaults

Packing Slip: Bank Default

Line	*Distribute by	Item	Description	Quantity	UOM	Unit Price	Extended Amount									
1	Amount		UN-2/1/3 2nd Qr fin. report				0.00									
Ship To: ETH10 SpeedChart: ETH10																
Use One Asset ID: Calculate																
Distribution Lines																
Copy Down	Amount	Quantity	*GL Unit	Account	Assets	Agency	Oper Unit	Fund	PC Bus Unit	Project	Activity	Category	Impl Agent	Donor	Openitem	Budget Date
1	37,950.00		UNDP1	74210	ETH	04000	ETH10	00098939	ETH10	00098939	ACTIVITY3		009676	00012		30/06/2019
2	7,326.00		UNDP1	75709	ETH	04000	ETH10	00098939	ETH10	00098939	ACTIVITY3		009676	00012		30/06/2019
3	-45,276.00		UNDP1	16005	ETH	04000	ETH10	00098939	ETH10	00098939	ACTIVITY3	NIMCA	009676	00012		30/06/2019

Business Unit: ETH10
Voucher ID: 00118232
 Print Invoice

Balancing
 Invoice Lines
 0.00
 (minus) Total 0.00 Calculate
 (equals) Difference Amount 0.00

N.K.


Checklist for Fund Transfer and Report on FACE


Name of the Project: Phase V Development partners support to Implementation of GTP II

Project No. 00098939

IP MoF

Description	Verified by Program	Verified by PMSU	Verified by Finance	If No explain why
Original cover letter and FACE properly completed	Yes	Yes		
The activities, budget and amount correctly completed on the space provided in line with AWP	Yes			
FACE & Cover letter properly signed and stamped by the authorized signatory indicating the authorized bank details.	Yes	Yes		
Ensured that 80% of the prior quarter advance and 100% of all earlier advances have been liquidated, reported and recorded	Yes NA	Yes NA		
The IP has been micro assessed and the risk for fund transfer is acceptable	Yes	Yes		
Prior period expenditures duly filled indicating remaining balance	Yes	Yes		
Standing note to file attached if the FACE is scanned copy	NA	NA		
Budget breakdown for expenditure attached	Yes			
Checked COA for mismatch in recording	Yes	Yes		
Required supporting documents are attached for Direct payment and reimbursement (pre-approval, contract document, invoice, vendor details, etc)	NA	NA		
FACE indicate beginning balance or remaining balance in authorized amount column	Yes	Yes		
The exchange rate for the period correctly calculated for advances	Yes	Yes		
Duly completed checklist from Programme and PMSU attached	Yes	Yes		
Athematic accuracy checked and verified	Yes	Yes		
Any approved exception (if any)				

Signature by Programme: 
 Date: July 3, 2019

Signature by PMSU: 
 Date: 10/01/2019

Signature by Finance: _____
 Date: _____

