

FY2019 PEPFAR Program Expenditure Reporting Template and DATIM Submission Instructions: Implementing Partners

Version: 9.6.2019

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FY2019 PEPFAR Program Expenditure Reporting Requirement



Introduction

The United States Government (USG) requires an annual report of expenditures of PEPFAR programs at the end of each fiscal year (1 October—30 September). The purpose of this reporting is to better understand the costs the USG incurs to provide a broad range of HIV services and support and subsequently use this information to improve program planning.

For PEPFAR program expenditures for FY19 (COP18), all PEPFAR Implementing Partners (IPs) are required to report their PEPFAR expenditures. There are no significant changes in PEPFAR Financial Classifications Reference Guide v1.1 for FY19.

New for FY19: Prime recipients are required to identify their subrecipients by name and DUNS number and to report subrecipient expenses by intervention. No cost categories will be requested for subrecipients for FY19.



PEPFAR Program Expenditures Excel Template

Consistent with previous years, recipients of PEPFAR funding (Implementing Partners, IPs) are required to capture PEPFAR Program Expenditures in an Excel form, PEPFAR Program Expenditures (DS-4213; OMB control number 1405-0208) as a part of completing the PEPFAR annual progress report at the end of each USG fiscal year (September 30).

For FY2019, the expenditure reporting template has:

- Reporting at OU level, not disaggregated by benefitting country or sub national unit (SNU)
- Has a common, standardized template for all IPs (posted on https://datim.zendesk.com)
- Reporting of subrecipient expenditures by intervention and subrecipient, with subrecipients identified by name and DUNS number



ER Template Overview

- This template should be used for reporting Fiscal Year 2019 (October 1, 2018

 September 30, 2019) PEPFAR program expenditures by Implementing
 Partners; a separate template should be completed for each separate
 Operating Unit (OU) and Award.
- Please read through expenditure reporting guidance, instructions on this template prior to completing this form. All guidance and instructions can be found at https://datim.zendesk.com.
- Public reporting burden for this collection of information is estimated to average 24 hours per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: Office of the US Global AIDS Coordinator (S/GAC) U.S. Department of State, 1800 G Street, NW, 10th Floor, Washington, DC 20006.



First Look at the Template



The template contains three tabs:

- Instructions (no data entry)
 - Provides background and information about the template and reporting requirement
- Metadata and Error Checks (data entry)
 - This tab contains two separate components:
 - The Metadata is where implementing mechanisms provide identifying information about themselves
 - The Error Checks section is where the template will identify certain errors that partners should correct prior to submission
- Expenditure Template (data entry)
 - This is where all interventions will be categorized and all expenditures will be reported



Process for Filling out the ER Template

1

- Enter Metadata
 - Identify information about the IP and the contracted project

2

- Enter FY19 PEPFAR Program Expenditures
 - Categorize interventions and enter expenditure data

3

- Review for Errors and Revise Data as Necessary
 - Review and verify data entered in step 2

4

- Upload to DATIM and Submit
 - Upload the ER template to DATIM via the Data Entry app, and submit the mechanism for approval via the Data Approval app.



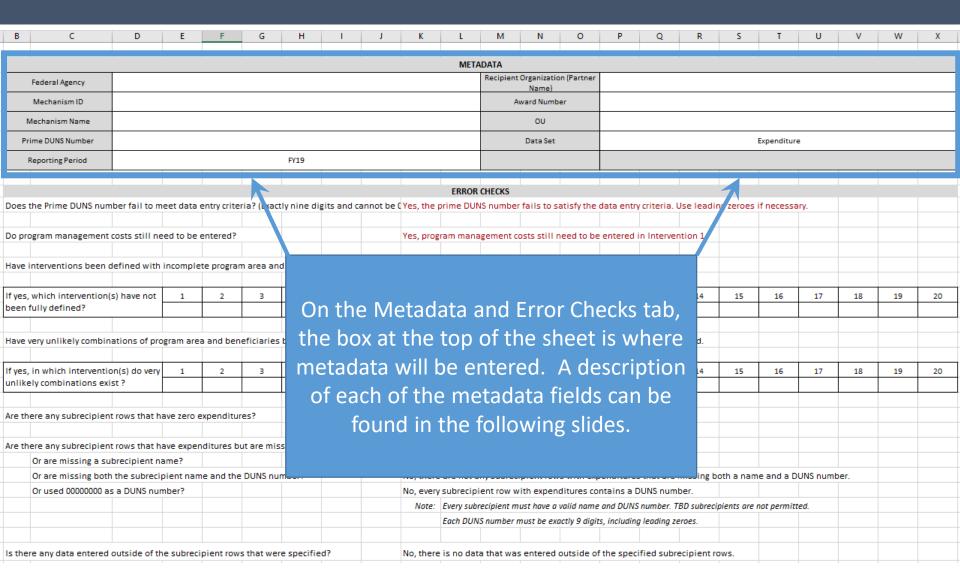
Enter Metadata

Tab: Metadata and Error Checks





Metadata and Error Checks Tab





DUNS Number

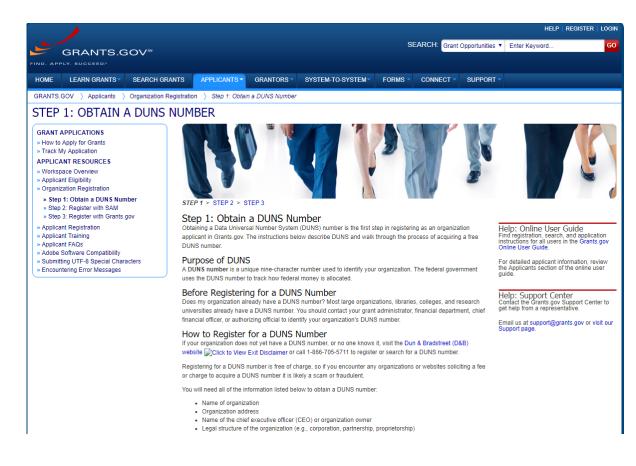
 The Data Universal Numbering System (DUNS) is required for all entities bidding on and receiving federal government awards, contracts, or grants.

To learn more about why DUNS numbers are required: www.grants.gov

To search for your DUNS number by organization name:

http://fedgov.dnb.com

To search for your DUNS number by Award number: https://www.usaspending.gov





Fields on Metadata and Error Checks Tab

Row & Column Name	Cell Reference	Description
Federal Agency	D3	Definition: The federal agency that issued the award for the implementing mechanism.
		Instructions: Please select the appropriate agency from the drop down list.
Mechanism ID	D4	Definition: The PEPFAR mechanism ID associated with this particular Award and OU.
		 The Mechanism ID in the template has to match the Mechanism ID in DATIM for which the template is being uploaded.
		Instructions: Please enter a 4-6 digit numeric value here.
Mechanism Name	D5	Definition: The mechanism name for this particular Award and OU.
		Instructions: Please enter the name of the mechanism here.
Prime DUNS Number	D6	 Definition: The Data Universal Numbering System (DUNS) number is a unique nine-digit identification number provided by the company Dun & Bradstreet. A DUNS number is required for all entities bidding on and receiving federal government contracts.
		 The DUNS number in the template also has to match the valid DUNS number in Facts Info for the template's mechanism.
		 Instructions: Please enter the nine digit numeric DUNS number that corresponds to the prime partner's organization.
Reporting Period	D7	Definition: The period of time on which the template is reporting.
		 Instructions: This field will be prepopulated since all mechanisms will be reporting on FY19 expenditures in this cycle. No data entry is required.



Fields on Metadata and Error Checks Tab

Row & Column Name	Cell Reference	Description
Recipient Organization (Partner Name)	P3	 Definition: The name of the partner's organization. Instructions: Please enter the name of the partner's organization here.
Award Number	P4	Definition: The agency-issued identifying number for this particular award.
		 The Award number in the template also has to match the valid Award number in Facts Info for the template's mechanism.
		Instructions: Please enter the award number here.
OU	P5	Definition: The PEPFAR Operating Unit (OU) in which this mechanism works.
		Instructions: Please select the appropriate OU from the dropdown list.
Data Set	P6	 Definition: The data set is the type of financial data captured in the template. This could be either expenditure or budget.
		 Instructions: This field will be prepopulated. For this reporting cycle, all mechanisms will be reporting on expenditures, so "Expenditure" will be prepopulated here. No data entry is required.



Enter Expenditures

Tab: Expenditure Template



Expenditure Template Tab

-4	Α	В	C	D	E	F	G	Н	1	J	K
1											
2				Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5	Categorization of Intervention 6	Categorization of Intervention 7	Categorization of Intervention 8
3	Interve	rention Name (optional)		Program Management							
4	Progra	ram Area		Program Management							
5	Benef	Beneficiary		Non-Targeted Pop: Not disaggregated							
6		Category		Program management expenditures	Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5	Expenditures against Intervention 6	Expenditures against Intervention 7	Expenditures against Intervention 8
7		sonnel: Salaries- Health Care Wo	orkers	NA							
8		sonnel: Salaries- Other Staff									
9		ge Benefits									
10		vel: International Travel									
11		vel: Domestic Travel									
12		ipment: Health Equipment									
13		ipment: Non-Health Equipment									
14		plies: Pharmaceutical	1	NA							
15		plies: Health- Non Pharmaceutic	cai	NA							
16 17		plies: Other Supplies	1MI	NIA.							
18		tractual: Contracted Health Care tractual: Contracted Intervention		NA NA							
19		tractual: Other Contracts	15	NA NA							
20		struction									
21	Trair										
22		recipient Total		NA NA	\$0	\$0	\$0	\$0	\$0	\$0	\$0
23		er: Financial Support for Benefic	riaries	INA.	Ç0	\$0	\$0	Ç0	Ç0	Ç0	ÇÜ
24		er: Other									
25		irect Charges			NA						
26	-	Expenditures per Intervention (Sur	m of Cost Categories)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
27				+-		*-	*-				•-
	Numb	ber of Subrecipients (0-100)		1]						
	realitio	rei or subreupients (0-100)		1	I						
29 30											
31		Subrecipient name	Subrecipient DUNS		Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5	Expenditures against Intervention 6	Expenditures against Intervention 7	Expenditures against Intervention 8
32	Sub1			NA							
			•		•	•	•	•		•	

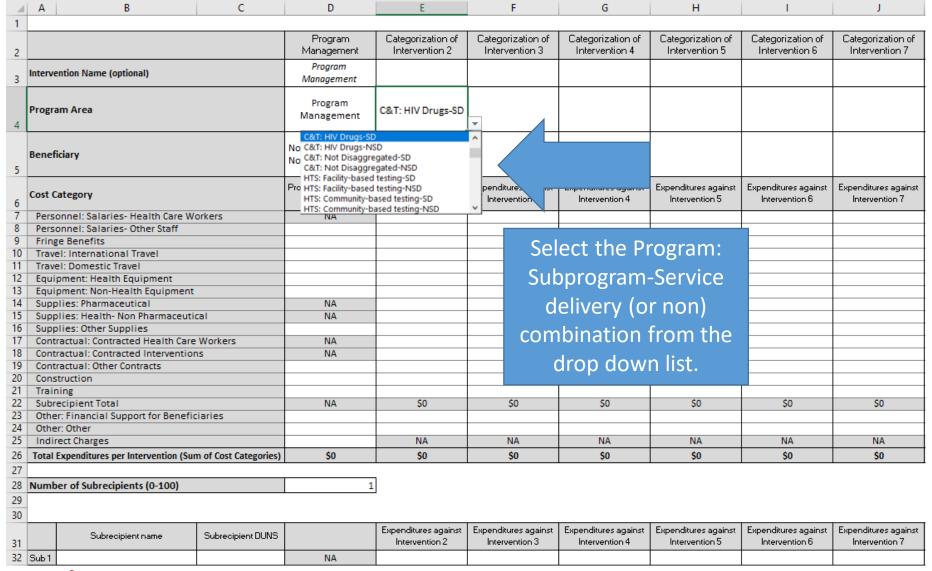


Step by Step Instructions for Entering Expenditure Data

- ☐ Step 1: Select program, sub-program, and service delivery or non-service delivery
- ☐ Step 2: Select beneficiary and sub beneficiary
- ☐ Step 3: Enter expenditures by sub cost categories for each intervention
- □Step 4: If applicable: enter subrecipient names, DUNS, and expenditures by intervention



Step 1: Select Program Area





Step 1: Select Program

- The complete list of the unique combination options on the program dropdown list is shown here
- Please note the following abbreviations that are used on this list:
 - C&T= Care and Treatment
 - HTS= Testing
 - PRFV= Prevention
 - SE= Socioeconomic
 - ASP= Above Site Programs
 - SD= service delivery
 - NSD= non service delivery

- o C&T: HIV Clinical Services-SD
- C&T: HIV Clinical Services-NSD
- C&T: HIV Laboratory Services-SD
- C&T: HIV Laboratory Services-NSD
- C&T: HIV Drugs-SD
- C&T: HIV Drugs-NSD
- C&T: Not Disaggregated-SD
- C&T: Not Disaggregated-NSD
- HTS: Facility-based testing-SD
- HTS: Facility-based testing-NSD
- HTS: Community-based testing-SD
- HTS: Community-based testing-NSD
- HTS: Not Disaggregated-SD
- HTS: Not Disaggregated-NSD
- PREV: Comm. mobilization, behavior & norms change-SD
- PREV: Comm. mobilization, behavior & norms change-NSD
- PREV: VMMC-SD
- PREV: VMMC-NSD
- PREV: PrEP-SD
- PREV: PrEP-NSD
- PREV: Opioid substitution therapy-SD
- PREV: Opioid substitution therapy-NSD
- o PREV: Condom & Lubricant Programming-SD
- PREV: Condom & Lubricant Programming-NSD
- PREV: Not Disaggregated-SD
- PREV: Not Disaggregated-NSD

- SE: Case Management-SD
- SE: Case Management-NSD
- SE: Economic strengthening-SD
- SE: Economic strengthening-NSD
- SE: Education assistance-SD
- SE: Education assistance-NSD
- SE: Psychosocial support-SD
- SE: Psychosocial support-NSD
- SE: Legal, human rights & protection-SD
- o SE: Legal, human rights & protection-NSD
- SE: Not Disaggregated-SD
- SE: Not Disaggregated-NSD
- ASP: Procurement & supply chain management
- o ASP: HMIS, surveillance, & research
- o ASP: Human resources for health
- ASP: Laboratory systems strengthening
- ASP: Institutional prevention
- o ASP: Public financial management strengthening
- o ASP: Policy, planning, coordination & management
- o ASP: Laws, regulations & policy environment
- ASP: Not Disaggregated

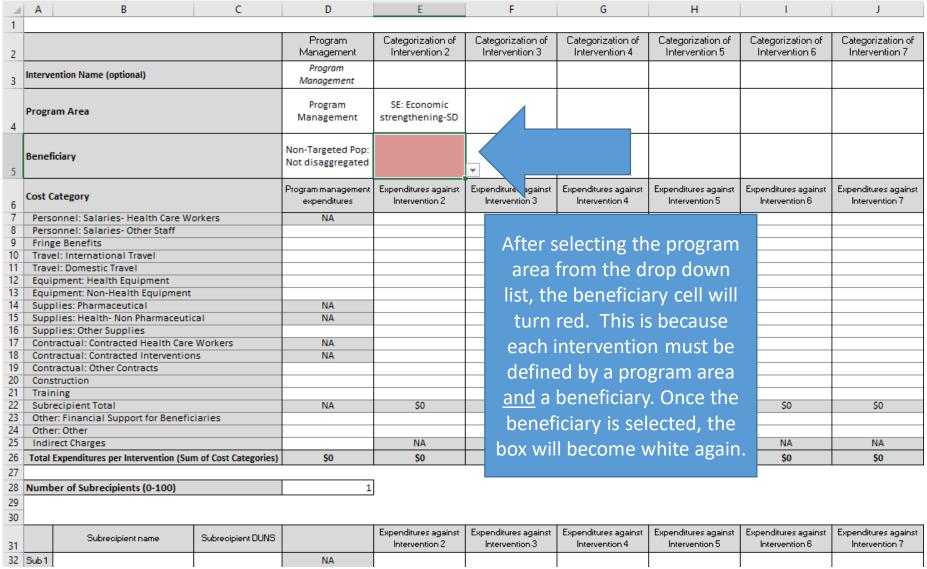


Step 1: Select Program

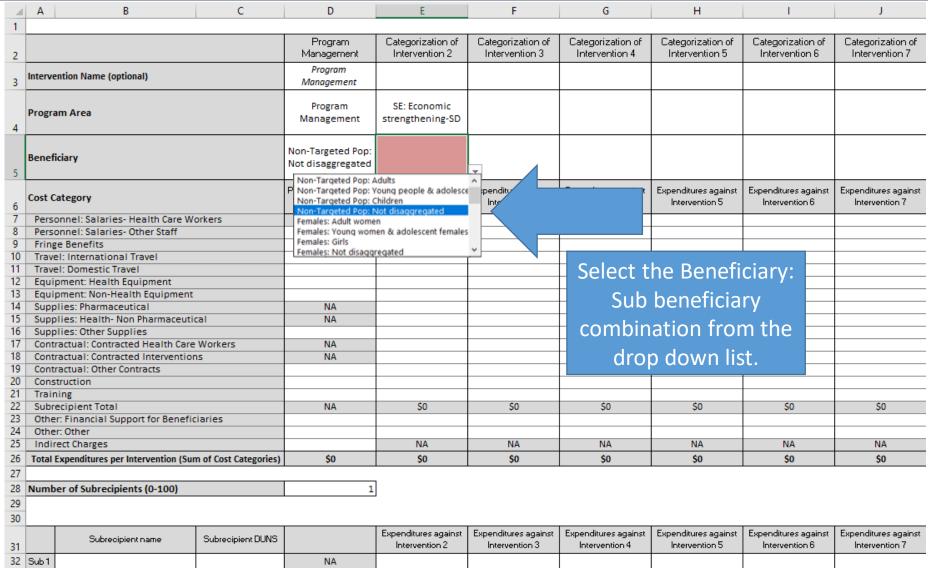
	1	A B	С	D	E	F	G	Н	I	J	
1											
2				Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5	Categorization of Intervention 6	Categorization of Intervention 7	
3	Int	ntervention Name (optional)		Program Management							
4	Pr	rogram Area		Program Management	SE ECON STRENGTHENING SERV DELIV						
5	Be	eneficiary		Non-Targeted Pop: Not disaggregated					s into the		
6		ost Category		Program management expenditures	Expenditures against Intervention 2	Expenditures again Intervention 3		•	area drop		
7		Personnel: Salaries- Health Care Wo	orkers	NA			iist. II the	e value in	this cell d	oes not	
8		Personnel: Salaries- Other Staff					and the second second second				
9	_	Fringe Benefits					exactly match one of the optio				
10		Travel: International Travel									
11		Travel: Domestic Travel					the dror	o down lis	t, IPs sho	uld not	
13	_	Equipment: Health Equipment Equipment: Non-Health Equipment									
14	_	Supplies: Pharmaceutical		NA			upload the template since a				
15		Supplies: Health- Non Pharmaceutic	cal	NA NA			apload the template since a				
16		Supplies: Other Supplies	cui	INA			templa	te with th	is error w	ill not	
17	_	Contractual: Contracted Health Care	Workers	NA			tempia	LE WILLI LII	iis error w	III HOL	
18	_	Contractual: Contracted Intervention		NA NA			constitut	o a valid	upload in	DATIM	
19	(Contractual: Other Contracts					Constitut	.e a vallu i	upioau iii	DATIIVI,	
20	(Construction					: ~	الحمانامين	ن النيب	I .	
21	1	Training					ı.e	., validati	on will fai	l.	
22	S	Subrecipient Total		NA	\$0	\$0		<u> </u>			
23	_	Other: Financial Support for Benefic	ciaries								
24		Other: Other									
25	-	Indirect Charges			NA	NA	NA	NA	NA	NA	
26	To	Total Expenditures per Intervention (Sun	m of Cost Categories)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
27											
28	Νι	lumber of Subrecipients (0-100)		1							
29					•						
30											
31		Subrecipient name	Subrecipient DUNS		Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5	Expenditures against Intervention 6	Expenditures against Intervention 7	
32	Su	ub1		NA							



Step 1: Select Program









 The complete list of the unique combination options on the beneficiary dropdown list is shown here



- Please note the following abbreviations that are used on this list:
 - Pop(s) = Population(s)
 - OVC = Orphans & vulnerable children

- Non-Targeted Pop: Adults
- o Non-Targeted Pop: Young people & adolescents
- o Non-Targeted Pop: Children
- Non-Targeted Pop: Not disaggregated
- o Females: Adult women
- o Females: Young women & adolescent females
- o Females: Girls
- o Females: Not disaggregated
- o Males: Adult men
- Males: Young men & adolescent males
- o Males: Boys
- o Males: Not disaggregated
- o Key Pops: Men having sex with men
- o Key Pops: Transgender
- Key Pops: Sex workers
- Key Pops: People who inject drugs
- o Key Pops: Not disaggregated
- o Pregnant & Breastfeeding Women: Not disaggregated
- o Priority Pops: People in prisons
- Priority Pops: Military & other uniformed services
- Priority Pops: Mobile Pops
- o Priority Pops: Displaced persons
- o Priority Pops: Clients of sex workers
- o Priority Pops: Not disaggregated
- OVC: Orphans & vulnerable children
- OVC: Care givers
- OVC & care givers: Not disaggregated



	A	В		С	D	E	F	G	H	I	J	
1												
2					Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5	Categorization of Intervention 6	Categorization of Intervention 7	
3	Interventio	on Name (optional)			Program Management							
4	Program i	Area			Program Management	SE: Economic strengthening-SD						
5	Beneficia	ry			Non-Targeted Pop: Not disaggregated	AGYW						
6	Cost Cate	onnel: Salaries- Health Care Workers			Program management expenditures	Expenditures against Intervention 2	Expendit s against Intervention 3	Funenditures against Eunenditures aga				
7	Personn				NA			<u> </u>	ot paste v	alues into	tilese	
8		onnel: Salaries- Other Staff						andla				
9		ge Benefits el: International Travel						cells; use the beneficiary d				
10		vel: International Travel vel: Domestic Travel						down list. If the value in this co				
11								down	list. If the	value in t	inis cell	
12		ent: Health Equipment										
13		ent: Non-Health Equipr	ment					does not exactly match one of the				
14		s: Pharmaceutical			NA			does not exactly materione of the				
15		s: Health- Non Pharma	ceutic	al	NA			options on the drop down list				
16 17		s: Other Supplies		1471	B10			Uption.	off the u	irop down		
18		tual: Contracted Health tual: Contracted Interve			NA NA			choule	d not unla	oad the te	mulata	
19		tual: Other Contracts	ention	5	INA			Silouid	a not upic	du lile le	IIIpiate	
20	Construc								4 a .aa .a l a 4 a	ا و اولا ولانان	النبيب محسم	
21	Training							F since a	template	with this	error will	
22		pient Total			NA NA	\$0	\$0			10.1		
23		inancial Support for Be	enefici	aries		¥	4-	not co	onstitute	a valid up	load in	
24	Other: 0	Other										
25	Indirect	Charges				NA	NA	ti Datii	M. i.e va	lidation w	ill tail	
26	Total Exp	enditures per Intervention	n (Sum	of Cost Categories) \$0	\$0	\$0					
27		•	•			•						
_	Number	of Subrecipients (0-100	n)		1]						
_	walliber (or addreciplents (0-100	7		1	I						
29 30												
31		Subrecipient name		Subrecipient DUNS		Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5	Expenditures against Intervention 6	Expenditures against Intervention 7	
22	Sub 1				NA							



_//		A B	С	D	E	F	G	Н	I	J
1										
2				Program Management	Categorization of Intervention 2	Categorization of Intervention 3		Categorization of Intervention 5	Categorization of Intervention 6	Categorization of Intervention 7
3	In	ntervention Name (optional)		Program Management						
4	Pı	Program Area		Program Management	SE: Economic strengthening-SD					
5	Ве	neficiary		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent females					
6	Co	Cost Category		Program management expenditures	Expenditures against Intervention 2	Expendito es agair Intervention 3	nst Expenditures against	Expenditures against	Expenditures against Intervention 6	Expenditures against Intervention 7
7		Personnel: Salaries- Health Care Worker	S	NA			0	ul		
8		Personnel: Salaries- Other Staff					Once t	tne		
9	_	Fringe Benefits					L			
10		Travel: International Travel					beneficia	ry nas		
11	_	Travel: Domestic Travel						1.0		
12	_	Equipment: Health Equipment					been select	ed from _		
13		Equipment: Non-Health Equipment					and the second	10.0		
14	_	Supplies: Pharmaceutical		NA			the drop do	own list,		
15		Supplies: Health- Non Pharmaceutical		NA						
16	_	Supplies: Other Supplies					the benefic	ciary cell L		
17		Contractual: Contracted Health Care World	kers	NA				The second second		
18		Contractual: Contracted Interventions		NA			will turn	white _		
19	_	Contractual: Other Contracts								
20		Construction					agair	າ. ∟		
21		Training			4-				4-	4-
22		Subrecipient Total		NA	\$0	\$0			\$0	\$0
23		Other: Financial Support for Beneficiarie Other: Other	5							
25					BIA	NA	N/A	BIA.	810	NIA
	_	Indirect Charges		4-	NA *-	NA	NA	NA	NA	NA
26 27	T	Total Expenditures per Intervention (Sum of C	cost Categories)	\$ 0	\$ 0	\$0	\$0	\$0	\$0	\$0
	B.				1					
	N	Number of Subrecipients (0-100)		1						
29 30										
31		Subrecipient name Sub	orecipient DUNS		Expenditures against Intervention 2	Expenditures again	nst Expenditures against	Expenditures against Intervention 5	Expenditures against Intervention 6	Expenditures against Intervention 7
	-	Sub 1		NA						2.12.2.1.1.1
52	20	DUD I		NA						



Step 2: Program Management

/_	Α	В	С	D		E	F	G	Н	I	J	K
1												
2				Program Management		orization of vention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5	Categorization of Intervention 6	Categorization of Intervention 7	Categorization of Intervention 8
3	Interv	ention Name (optional)		Program Management								
4	Progr	am Area		Program Management								
5	Benef	ficiary		Non-Targeted Pop: Not disaggregated	K							
6	Cost (Category		Program management expenditures		tules against vention 2	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5	Expenditures against Intervention 6	Expenditures against Intervention 7	Expenditures against Intervention 8
7	Pers	sonnel: Salaries- Health Care W	orkers	NA		Tho	first interv	ontion has				
8		sonnel: Salaries- Other Staff				THE	III St IIItei v	ention nas				
9		ge Benefits				h	البصوم موم	a+ad aa				
10		el: International Travel				Ŋ	een popul	aleu as				
11		el: Domestic Travel			program management in							
12		ipment: Health Equipment				prog	gram mana	igement in				
13		ipment: Non-Health Equipment										
14		plies: Pharmaceutical		NA		the t	olank temp	plate; most				
15		plies: Health- Non Pharmaceutic	cal	NA								
16		plies: Other Supplies					์ Is will hav	e some				
17		tractual: Contracted Health Care		NA								
18		tractual: Contracted Intervention	ns	NA		expe	nditures fo	or program				
19		tractual: Other Contracts										
20 21		struction				mar	nagement,	and if so				
22		ning		NA					\$0	\$0	\$0	\$0
23		recipient Total er: Financial Support for Benefic	iaries	IVA		they	would be	entered in	\$0	ŞU	ŞU	ŞU
24		er: Other	.101162			-tire y						
25		irect Charges					this colu	mn	NA	NA	NA	NA
26		Expenditures per Intervention (Sur	m of Cost Categories)	\$0		SO	S0	S0	\$0	\$0	\$0	\$0
27	TOLDI	expenditures per intervention (sur	ii oi cost categories)	ŞU		JU	30	Şu	ŞU	Şu	ŞU	ŞU
	Marine	ber of Subrecipients (0-100)			1							
	Num	bei of subrecipients (0-100)		1 1	J							
29 30												
					Expendi	tures against	Expenditures against	Expenditures against	Expenditures against	Expenditures against	Expenditures against	Expenditures against
31		Subrecipient name	Subrecipient DUNS			vention 2	Intervention 3	Intervention 4	Intervention 5	Intervention 6	Intervention 7	Intervention 8
32	Sub1			NA								
22												



Step 2 OPTIONAL: Name Intervention

- 4	Α	В	С	D	Е	F	G	Н	1	J	
1											
2				Program Management	Categorization of Intervention 2	Categoriz on of Interv up 3	Categorization of Intervention 4	Categorization of Intervention 5	Categorization of Intervention 6	Categorization of Intervention 7	
3	Interventio	on Name (optional)		Program Management							
4	Program /	Area		Program Management	SE: Economic strengthening-SD						
5	Beneficiar	ry		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent females	~	name fo	or each inter	row to provide vention. The	e	
6	Cost Cate	<u> </u>		Program management expenditures	Expenditures against Intervention 2	Expenditures against Intervention 3			elpful way to tivities, spec	7	
7		el: Salaries- Health Care W	/orkers	NA							
8		el: Salaries- Other Staff					initiat				
9	Fringe B						conve				
10		nternational Travel Domestic Travel									
12		ent: Health Equipment					corresp	onds to. For	r example, a	n	
13		ent: Non-Health Equipment	<u> </u>								
14		s: Pharmaceutical	<u>`</u>	NA			intervention name might be "Finding				
15	- ' '	s: Health- Non Pharmaceut	ical	NA			Men" or "	DREAMS" or	"COP18 VIV	IMC	
16	Supplies	s: Other Supplies									
17	Contract	tual: Contracted Health Care	e Workers	NA			Initiative	." This field i	is optional a	nd 📉	
18	Contract	tual: Contracted Interventio	ns	NA							
19	Contract	tual: Other Contracts					Will not i	be imported	into DATIM	or	
20	Construc						include	d in any ana	lysis. It is fo	r	
21	Training					4-					
22		pient Total		NA	\$0	\$0	reference	only and is	meant to as	sist ^{\$0}	
23	Other: 0	inancial Support for Benefi	ciaries								
25		Charges			NA	NA	in tr	ne data entry	y process.	NA	
26		enditures per Intervention (Su	um of Cost Catogories)	\$0	\$0	\$0	SO	S0	S0	SO SO	
27	TOTAL EXP	enultures per intervention (Su	ini oi cost categories)	ŞU	Şυ	ŞU	ŞU	ŞU	ŞU	ŞU	
		fo.1 11 1 10 4553			1						
	Number o	umber of Subrecipients (0-100)		1]						
29											
30											
31		Subrecipient name	Subrecipient DUNS		Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5	Expenditures against Intervention 6	Expenditures against Intervention 7	
32	Sub1			NA							

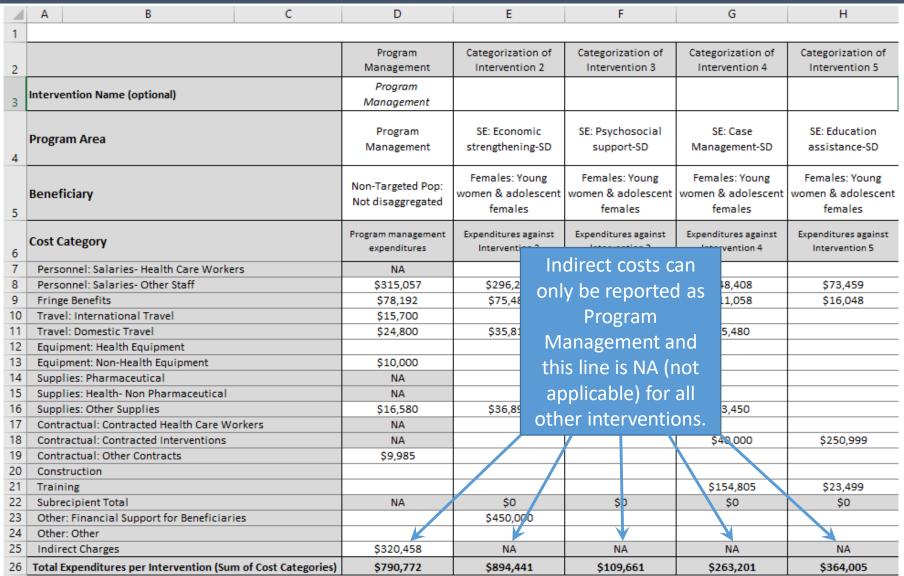


	A B	С	D	E	F	G	Н
1							
2			Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5
3	Intervention Name (optional)		Program Management				
4	Program Area		Program Management	SE: Economic strengthening-SD	SE: Psychosocial support-SD	SE: Case Management-SD	SE: Education assistance-SD
5	Beneficiary		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent females	Females: Young women & adolesce females	For each inte	
6	Cost Category		Program management expenditures	Expenditures against Intervention 2	Expenditures agains Intervention 3	into the app	propriate
7	Personnel: Salaries- Health Care Workers		NA			sub cost categories.	
8	Personnel: Salaries- Other Staff		\$315,057	\$296,253	\$65,808	y,	,,
9	Fringe Benefits		\$78,192	\$75,480	5,408	\$11,058	\$16,048
10	Travel: International Travel		\$15,700				
11	Travel: Domestic Travel		\$24,800	\$35,817		5,480	
12	Equipment: Health Equipment						
13	Equipment: Non-Health Equipment		\$10,000				
14	Supplies: Pharmaceutical		NA				
15	Supplies: Health- Non Pharmaceutical		NA				
16	Supplies: Other Supplies		\$16,580	\$36,891	\$15,897	\$3,450	
17	Contractual: Contracted Health Care Wo	rkers	NA				
18	Contractual: Contracted Interventions		NA			\$40,000	\$250,999
19	Contractual: Other Contracts		\$9,985				
20	Construction						
21	Training					\$154,805	\$23,499
22	Subrecipient Total		NA	\$0	\$0	\$0	\$0
23	Other: Financial Support for Beneficiaries			\$450,000			
24	Other: Other						
25	Indirect Charges		\$320,458	NA	NA	NA	NA
26	Total Expenditures per Intervention (Sun	of Cost Categories)	\$790,772	\$894,441	\$109,661	\$263,201	\$364,005



	A B	С	D	E	F	G	Н
1							
2			Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5
3	Intervention Name (optional)		Program Management				
4	Program Area		Program Management	SE: Economic strengthening-SD	SE: Psychosocial support-SD	SE: Case Management-SD	SE: Education assistance-SD
5	Beneficiary		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescer females		for health ca	females
6	Cost Category		Program management expenditures	Expenditures against Intervention 2		armaceutica supplies – no	ditures against
7	Personnel: Salaries- Health Care Worker	rs	NA		pharmac	eutical, and	
8	Personnel: Salaries- Other Staff		\$315,057	\$296,253		\$73,459	
9	Fringe Benefits		\$78,192	\$75,480	contracted	\$16,048	
10	Travel: International Travel		\$15,700		should be inc	curred as part	t of
11	Travel: Domestic Travel		\$24,800	\$35,817	Should be int	Lurreu as par	
12	Equipment: Health Equipment				a technical in	ntervention a	nd
13	Equipment: Non-Health Equipment		\$10,000				
14	Supplies: Pharmaceutical		NA		not und	er program	
15	Supplies: Health- Non Pharmaceutical		NA		manageme	nt. These cel	lc
16	Supplies: Other Supplies		\$16,580	\$36,891			
17	Contractual: Contracted Health Care Wo	orkers	NA		are there	fore NA (not	
18	Contractual: Contracted Interventions		NA				250,999
19	Contractual: Other Contracts		\$9,985		аррисаріе) for Program	
20	Construction				Mana	igement.	
21	raining						\$23,499
22	Subrecipient Total		NA	\$0	\$0	\$0	\$0
23	Other: Financial Support for Beneficiari	es		\$450,000			
24	Other: Other						
25	Indirect Charges		\$320,458	NA	NA	NA	NA
26	Total Expenditures per Intervention (Sun	of Cost Categories)	\$790,772	\$894,441	\$109,661	\$263,201	\$364,005







	A B	С	D	E	F	G	Н	
1								
2			Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization Intervention	
3	Intervention Name (optional)		Program Management					
4	Program Area		Program Management	SE: Economic strengthening-SD	SE: Psychosocial support-SD	SE: Case Management-SD	SE: Educatio assistance-S	
5	Beneficiar y		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent females	Females: Young women & adole females	Females: Young Data entry for		ing scent
6	Cost Category		Program management expenditures	Expenditures against Intervention 2	Expenditures ag Intervention	intervention's	s sub	ainst 5
7	Personnel: Salaries- Health Care Worke	rs	NA	*		cost category v	wnere	
8	Personnel: Salaries- Other Staff		\$315,057	\$296,253	\$65,808	there was no	FV10 59	
9	Fringe Benefits		\$78,192	\$75,480	\$15,408		18	
10	Travel: International Travel		\$15,700	—		expenditure is	s not	
11	Travel: Domestic Travel		\$24,800	\$35,817	\$12,548			
12	Equipment: Health Equipment					equired; these	e lines	
13	Equipment: Non-Health Equipment		\$10,000	*		can be left bl	ank	
14	Supplies: Pharmaceutical		NA			carr be left bi		
15	Supplies: Health- Non Pharmaceutical		NA					
16	Supplies: Other Supplies		\$16,580	\$36,891	\$15,897	\$3,450		
17	Contractual: Contracted Health Care Wo	orkers	NA	1				
18	Contractual: Contracted Interventions		NA			\$40,000	\$250,999	
19	Contractual: Other Contracts		\$9,985					
20	Construction							
21	Training					\$154,805	\$23,499	
22	Subrecipient Total		NA	\$0	\$0	\$0	\$0	
23	Other: Financial Support for Beneficiari	es		\$450,000				
24	Other: Other							
25	Indirect Charges		\$320,458	NA	NA	NA	NA	
26	Total Expenditures per Intervention (Sun	n of Cost Categories)	\$790,772	\$894,441	\$109,661	\$263,201	\$364,005	



Step 4: If Applicable – Subrecipient Expenditure

/_	Α	В	С	D	E	F	G	Н	
1									
2				Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5	
3	Inten	vention Name (optional)		Program Management					
4	Progr	am Area		Program Management	SE: Economic strengthening-SD	HTS: Facility-based testing-SD	PREV: VMMC-SD	C&T: HIV Clinical Services-NSD	
5	Beneficiary			Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent female:	Males: Adult men	Males: Adult men	Non-Targeted Pop: Adults	
6	Cost	Category		Program management expenditures	Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5	
7	Personnel: Salaries- Health Care Workers		NA	\$234,435		\$180,105	\$95,970	Ī	
8	Personnel: Salaries- Other Staff				\$59,481	\$25,055	\$565,444	I	
9	Fringe Benefits		\$15,470	\$95,431	\$518,120	\$45,674	\$138,906		
10		el: International Travel			\$81,968				
11	Trav	vel: Domestic Travel				\$79,182	\$5,930	\$15,962	
12	Equi	ipment: Health Equipment		\$12,980			\$52,430		
13	Equi	ipment: Non-Health Equipment							
14	Sup	plies: Pharmaceutical		NA	\$312,466				I
15	Sup	plies: Health- Non Pharmaceutica	al	NA	\$51,620	English a Alberta		tarahan ataut	4 .
16	Sup	plies: Other Supplies			\$49,845	Enter the i	านmber ot	subrecipie	ents
17	Con	tractual: Contracted Health Care	Workers	NA		' EV4.6			
18	Con	tractual: Contracted Intervention	ns	NA		with FY19) subawar	ds associat	ted
19	Con	tractual: Other Contracts							
20	Con	struction		\$2,550		with this IN	vi to gener	rate data e	entry
21	Trai	ning		\$570					· ·
22	Sub	recipient Total		NA	\$0	fields to er	iter detaile	ed intorma	ition
23	Oth	er: Financial Support for Beneficia	aries						
24	Other: Other				tor	each subr ϵ	ecipient		
25	Indi	rect Charges			NA				
26	Total	Expenditures per Intervention (S	um of Cost Categorie	\$31,570	\$8 ,765	\$668,783	\$788,072	\$1,086,270	
27									•
	Num	ber of Subrecipients (0-100)							
20		aci oi cantecipicino (o 100)							
	-								



Step 4: Subrecipient Expenditure by Intervention

6	Cost Category	Program management expenditures	Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5
7	Personnel: Salaries- Health Care Workers	NA	\$234,435		\$180,105	\$95,970
8	Personnel: Salaries- Other Staff			\$59,481	\$25,055	\$565,444
9	Fringe Benefits	\$15,470	\$95,431	\$518,120	\$45,674	\$138,906
10	Travel: International Travel		CO1 0C0			
11	Travel: Domestic Travel	December Co		described.	\$5,930	\$15,962
12	Equipment: Health Equipment	Record in Su	ibrecipient	data entry	\$52,430	
13	Equipment: Non-Health Equipment	fields the	Cubraciaior	at 10 0 100 0		
14	Supplies: Pharmaceutical	neids the	Subrecipier	it name,		
15	Supplies: Health- Non Pharmaceutical	DUNS numb	or and ove	andituras	\$87,990	\$12,000
16	Supplies: Other Supplies	DONS Hullik	ber, ariu exp	Jenuitures		\$34,534
17	Contractual: Contracted Health Care Workers	by	intarvantia	n	\$30,000	
18	Contractual: Contracted Interventions	Dy	by intervention			\$223,454
19	Contractual: Other Contracts				\$6,788	
20	Construction	\$2,550				
21	Training	\$570				
22	Subrecipient Total	MA	\$0	\$0	\$0	\$0
23	Other: Financial Support for Beneficiaries					
24	Other: Other					
25	Indirect Charges		NA	NA	NA	NA
26	Total Expenditures per Intervention (Sum of Cost Cate)	gorie \$31,570	\$825,765	\$668,783	\$788,072	\$1,086,270
27			7			
28	Number of Subrecipients (9-100)	5] [
29						
30						4
31	Subrecipient name Subrecipient DU	INS	Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5
32	Sub1	NA				
33	Sub 2	NA				
34	Sub 3	NA				
35	Sub 4	NA				
36	Sub 5	NA				
37		10 1				



Please note: If subrecipient does not yet have a DUNS number at the time of reporting, use '111111111'.

Total Subrecipient Expenditure by Intervention

6	Cost Category	Program management expenditures	Expenditures Intervent	-	Expenditur Interve		Expenditur Interve	es against ntion 4	Expenditure Interver	
7	Personnel: Salaries- Health Care Workers	NA	\$234,4	135			\$180,105		\$95,970	
8	Personnel: Salaries- Other Staff				\$59,	481	\$25,	055	\$565	444
9	Fringe Benefits	\$15,470	5	Th	ماري م	racini	ont T	atal b	.	906
10	Travel: International Travel		1	III	ie Sub	recipi	ient i	otal b	У	
11	Travel: Domestic Travel				intor	ontic	on wil	Lho		62
12	Equipment: Health Equipment	\$12,980			interv	ventic	וו W ווכ	ibe		
13	Equipment: Non-Health Equipment			aut	omati	cally	calcul	ated	a c	
14	Supplies: Pharmaceutical	NA	automatically calculated as							
5	Supplies: Health- Non Pharmaceutical	NA	expenditures are entered					000		
16	Supplies: Other Supplies		1		periui		uic c		<u>u </u>	34
17	Contractual: Contracted Health Care Workers	NA					\$30	000		
18	Contractual: Contracted Interventions	NA					\$354	,100	\$2 23,	,454
19	Contractual: Other Contracts						\$6,	'88		
20	Construction	\$2,550				1		1		1
21	Training	\$570								
22	Subrecipient Total	NA	\$6,57	73	\$47,	832	\$	0	\$100	,000
23	Other: Financial Support for Beneficiaries									
24	Other: Other									
25	Indirect Charges		NA		N.	A	N	A	N/	A
26	Total Expenditures per Intervention (Sum of Cost Categorie	\$31,570	\$832,3	338	\$716	,615	\$788	,072	\$1,186	5,270
27										
28	Number of Subrecipients (0-100)	5								

28 Number of Subrecipients (0-100) 5

30

31		Subrecipient name	Subrecipient DUNS		Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5
32	Sub1	Sub 132	189576218	NA	\$5,479	\$8,912		\$100,000
33	Sub 2	Sub 456	986425499	NA				
34	Sub 3	Sub 789	120840496	NA	\$1,094			
35	Sub 4	Sub 135	489871604	NA				
36	Sub 5	Sub 246	789195180	NA		\$38,920		
37						_		



Total Expenditure by Intervention

	Α	В	С	D	E	F	G	Н
1								
2				Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5
3	Interven	ion Name (optional)		Program Management				
4	Progran	Area		Program Management	SE: Economic strengthening-SD	SE: Psychosocial support-SD	SE: Case Management-SD	SE: Education assistance-SD
5	Benefic	ary		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent females			
6	Cost Cat	egory		Program management expenditures	Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5
7	Person	nel: Salaries- Health Care Work	ers	NA				
8	Person	nel: Salaries- Other Staff		\$315,057	\$296,253	\$65,808	\$48,408	\$73,459
9	Fringe Benefits			\$78,192	\$75,480	\$15,408	\$11,058	\$16,048
10		International Travel		\$15,700				
11	Travel:	Domestic Travel		\$24,800	Total e			
12		ent: Health Equipment			interventi			
13		ent: Non-Health Equipment		\$10,000	interventi			
14		s: Pharmaceutical		NA	expenditur			
15		s: Health- Non Pharmaceutical		NA	<u>-</u>			
16		s: Other Supplies		\$16,580	ass	sist in data er	ntry.	
17		tual: Contracted Health Care W	/orkers	NA				
18		tual: Contracted Interventions		NA			\$40,000	\$250,999
19		tual: Other Contracts		\$9,985				
20	Constru							
21	Trainin				-		\$154,805	\$23,499
22		pient Total		NA	\$0	\$(\$0	\$0
23		inancial Support for Beneficia	ries		\$450,000			
24	Other:			4000 150				
25		: Charges		\$320,458	N,	N	A	NA
26	Total Expenditures per Intervention (Sum of Cost Categories)			\$790,772	\$894,441	\$109,661	\$263,201	\$364,005



Total Expenditure by Sub Cost Category

	A B	С	V	W	Х	Υ
1						
2			Categorization of Intervention 19	Categorization of Intervention 20		
3	Intervention Name (optional)					
4	Program Area					
5	Beneficiary					
6	Cost Category		Expenditures against Intervention 19	Expenditures against Intervention 20	TOTAL	% Total
7	Personnel: Salaries- Health Care Workers				\$751,020	19%
8	Personnel: Salaries- Other Staff				\$726,430	18%
9	Fringe Benefits				\$813,601	20%
10	Travel: International Travel				\$81,968	2%
11	Travel: Domestic Travel				\$101,074	3%
12	Equipment: Health Equipment				\$65,410	2%
13	Equipment: Non-Health Equipment				\$0	0%
14	Supplies: Pharmaceutical				\$312,466	8%
15	Supplies: Health- Non Pharmaceutical				\$202,810	5%
16	Supplies: Other Supplies				\$96,379	2%
17	Contractual: Contracted Health Care Workers				\$30,000	1%
18	Contractual: Contracted Interventions				\$667,254	17%
19	Contractual: Other Contracts				\$6,788	0%
20	Construction				\$2,550	0%
21	Training				\$570	0%
22	Subrecipient Total		\$0	\$0	\$165,992	4%
23	Other: Financial Support for Beneficiaries				\$0	0%
24	Other: Other				\$0	0%
25	Indirect Charges		NA	NA	\$0	0%
26	Total Expenditures per Intervention (Sum of Cost	t Categorie	\$0	\$0	\$4,024,312	100%

Total
expenditure for
each sub object
class and its %
of the total is
calculated in
column X and Y
of the
expenditure
template tab as
the expenditure
is entered. This
may assist in
data entry.



Fields on the Expenditure Template Tab

Row & Column Name	Cell Reference	Description
Intervention Name	D3-W3	• Instructions: OPTIONAL free text entry. If it is useful, this cell can be used to provide a 'name' for each intervention. The name could be a helpful way to remember which activities, special initiatives or internal naming conventions each intervention corresponds to. For example, an intervention name might be "Finding Men" or "DREAMS" or "COP18 VMMC Initiative." This field is optional and will not be imported into DATIM or included in any analysis. It is for reference only and is meant to assist in the data entry process.
Program Area	D4-W4	 A program is a distinct organization of resources directed toward a specific strategic objective, or a set of activities that achieve a common outcome. Each program is further disaggregated into subprograms and whether it is service delivery or non service delivery. When the activities cannot be disaggregated, funds may be classified under the major program, not disaggregated. Instructions: Please select a Program Area from the drop down menu. The value in this cell must be selected from the drop-down menu; do not paste any value into this cell. IPs should not upload the template if there is not an exact match, since a template with this error will not constitute a valid upload in DATIM, i.e., validation will fail.
Beneficiary	D5-W5	 Definition: Beneficiary is the targeted population that is intended to benefit from specific activities (e.g., the intended recipients of the PEPFAR programs). Individuals might belong to more than one category; however, what needs to be classified is the expenditure according to the primary objective of the program. Instructions: Please select the Beneficiary from the drop down menu. The value in this cell must be selected from the drop-down menu; do not paste any value into this cell. IPs should not upload the template if there is not an exact match, since a template with this error will not constitute a valid upload in DATIM, i.e., validation will fail.

Note: For more information on PEPFAR Financial Classifications, please refer to the PEPFAR Financial Classification Reference Guide on DATIM Support https://datim.zendesk.com.



Row & Column Name	Cell Reference	Description
Personnel: Salaries- Health	E7-W7	 Definition: Expenditure for the direct costs of IP employee salaries and wages, excluding benefits, for healthcare workers.
Care Workers		• Instructions: Please enter Personnel: Salaries- Health Care Workers expenditures here. Please enter only non-negative integers.
Personnel: Salaries- Other	D8-W8	 Definition: Expenditure for the direct costs of staff salaries and wages, excluding benefits, for IP employees who are not classified as healthcare workers.
Staff		• Instructions: Please enter Personnel: Salaries- Other Staff expenditures here. Please enter only non-negative integers.
Fringe Benefits	D9-W9	 Definition: Expenditure for the direct costs of employee fringe benefits unless treated as part of an approved indirect cost rate.
		 Instructions: Please enter your Fringe Benefits expenditures here. Please enter only non-negative integers.



Row & Column Name	Cell Reference	Description
Travel: International Travel	D10-W10	 Definition: Expenditure for the direct costs of travel, including lodging, meals, incidentals, and air and ground transport by IP personnel outside of or to/from the country of implementation Instructions: Please enter your Travel: International Travel expenditures here. Please enter only non-negative integers.
Travel: Domestic Travel	D11-W11	 Definition: Expenditure for the direct costs of travel, including lodging, meals, incidentals, and air and ground transport by IP personnel within the benefitting country. Instructions: Please enter your Travel: Domestic Travel expenditures here. Please enter only non-negative integers.
Equipment: Health Equipment	D12-W12	 Definition: Expenditure for the direct costs (purchase or lease) of equipment, nonexpendable, tangible personal property having a useful life of more than one year and an acquisition cost which equals or exceeds the lesser of the capitalization level established by the IP for financial statement purposes, or \$5,000, used for surgical procedures, or to diagnose, cure, treat, or prevent disease. Instructions: Please enter Equipment: Health Equipment expenditures here. Please enter only non-negative integers.



Row & Column Name	Cell Reference	Description
Equipment: Non-Health Equipment	D13-W13	 Definition: Expenditure for the direct costs (purchase or lease) of equipment, nonexpendable, tangible personal property having a useful life of more than one year and an acquisition cost which equals or exceeds the lesser of the capitalization level established by the IP for financial statement purposes, or \$5,000 which is not classified as health equipment.
		• Instructions: Please enter Equipment: Non- Health Equipment expenditures here. Please enter only non-negative integers.
Supplies: Pharmaceutical	E14-W14	Definition: Expenditure for the direct costs of medications used cure, treat, or prevent disease
		• Instructions: Please enter Supplies: Pharmaceutical expenditures here. Please enter only non-negative integers.
Supplies: Health- Non Pharmaceutical	E15-W15	Definition: Expenditure for the direct costs of supplies used for the health procedures and the prevention, diagnosis, treatment of disease.
		• Instructions: Please enter Supplies: Health – Non Pharmaceutical expenditures here. Please enter only non-negative integers.
Supplies: Other Supplies	D16-W16	• Definition: Expenditure for the direct costs of office and other consumable supplies with a per-unit cost of less than \$5,000.
		• Instructions: Please enter Supplies: Other Supplies expenditures here. Please enter only non-negative integers.



Row & Column Name	Cell Reference	Description
Contractual: Contracted Health Care Workers	E17-W17	 Definition: Expenditure for the direct costs of (a) contract(s) for healthcare workers, who are not employed by the IP, but contracted to perform health care services. Instructions: Please enter Contractual: Contracted Health Care Workers expenditures here.
		Please enter only non-negative integers.
Contractual: Contracted Interventions	E18-W18	 Definition: Expenditure for the direct cost of a legal instrument by which a non-Federal entity purchases property or services needed to carry out the project or program under a Federal Award.
		 Instructions: Please enter Contractual: Contracted Interventions expenditures here. Please enter only non-negative integers.
Contractual: Other Contracts	D19-W19	 Definition: Expenditure for the direct costs of (a) contract (s) for other, non-intervention purposes.
		 Instructions: Please enter Contractual: Other Contracts expenditures here. Please enter only non-negative integers.
Construction	D20-W20	Definition: Expenditure for the direct costs for construction or renovation.
		 Instructions: Please enter Construction expenditures here. Please enter only non-negative integers.
Training	D21-W21	Definition: Expenditure for the direct costs for trainings, meetings, and conferences.
		• Instructions: Please enter Training expenditures here. Please enter only non-negative integers.



Row & Column Name	Cell Reference	Description
Subrecipient Total	E22-W22	 Definition: Expenditure for the direct costs of all payments to subrecipients, which are non-Federal entities that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. Instructions: Total Subrecipient expenditure for each intervention is calculated here as expenditures are entered. No data entry is required.
Other: Financial	D23-W23	Definition: Expenditure for the direct costs of financial support for beneficiaries.
Support for Beneficiaries		 Instructions: Please enter Other: Financial Support for Beneficiaries expenditures here. Please enter only non-negative integers.
Other: Other	D24-W24	Definition: Expenditure for the direct costs that do not fit any of the aforementioned direct cost object classes.
		 Instructions: Please enter Other: Other expenditures here. Please enter only non-negative integers.
Indirect Charges	D25	 Definition: Indirect costs which were not charged as direct; costs not easily assignable to specific awards and activities because a direct relationship to cost objectives cannot be shown or would be arbitrary.
		• Instructions: Please enter the value of Indirect Costs; do not enter a rate. Please enter only non-negative integers.
Total Expenditures per	D26-W26	 Definition: All PEPFAR funds expended by the Implementing Partner during FY19, including funds subawarded to a subrecipient.
Intervention		 Instructions: Total expenditure for each intervention is calculated here as expenditures are entered. No data entry is required.



Row & Column Name	Cell Reference	Description
Number of Subrecipients (0-100)	D28	 Definition: Number of subrecipients that receive (a) FY19 subaward(s) from the Implementing Partner associated with this particular mechanism ID. Instructions: Please enter the number of subrecipients here.
Sub#	E32-W32 – E131-W131	 Definition: Expenditure for the direct costs of all payments to subrecipients, which are non-Federal entities that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program.
		 Instructions: Please enter Subrecipient expenditures here. Please enter only non-negative integers.
		 For FY2019, all funds subawarded to subrecipients must be reported by subrecipient name and intervention, i.e., by program and beneficiary classification. Subrecipient expenditures do not need to be reported by cost category. Total Subrecipient expenditure for each intervention is calculated on line 22 as expenditures are entered.
Sub #: Subrecipient name	B32-B131	 Definition: The name of the subrecipient's organization. Instructions: Please enter the name of the subrecipient's organization here.
Sub #: Subrecipient DUNS	C32-C131	 Definition: The Data Universal Numbering System (DUNS) number is a unique nine-digit identification number provided by the company Dun & Bradstreet. Instructions: Please enter the nine digit numeric DUNS number that corresponds to the subrecipient's organization. If the DUNS number of the subrecipient is not known at the time of reporting, please enter 111111111. Blank entries or use of 000000000 will result in the upload failing validation.

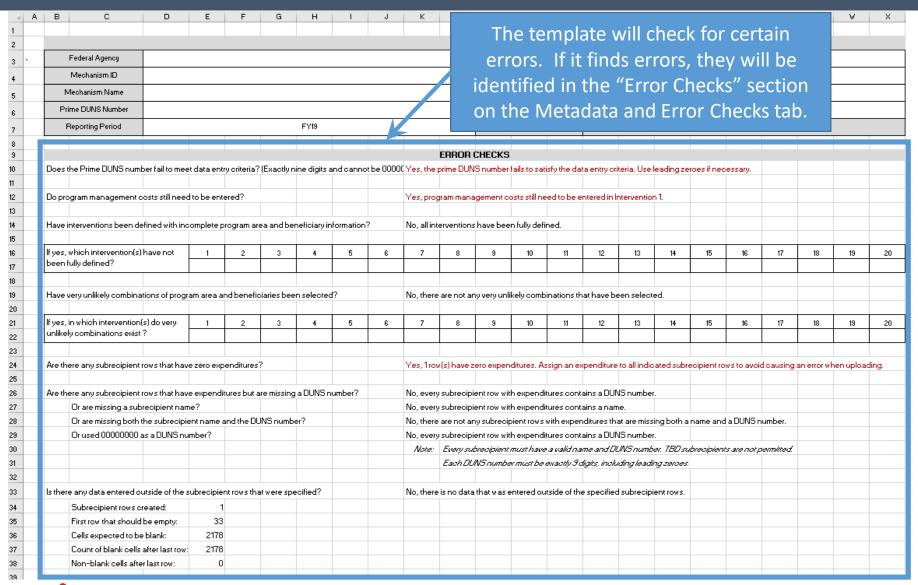


Review for Errors

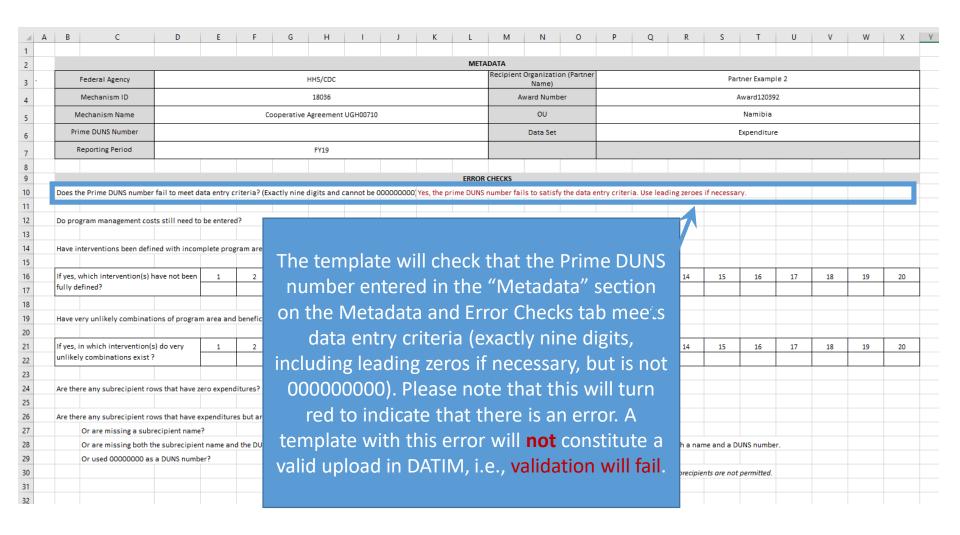
Tab: Metadata and Error Checks



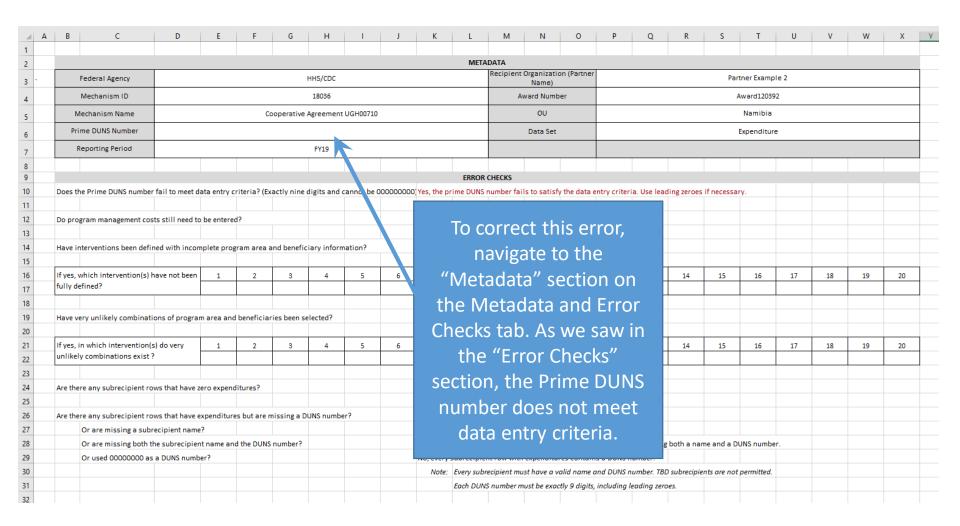
Error Checks in the Template: Overview







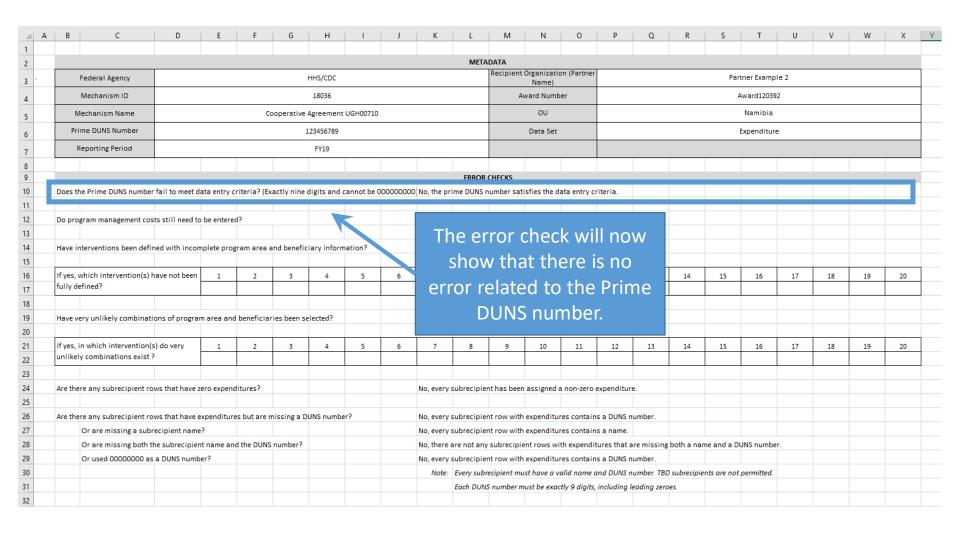




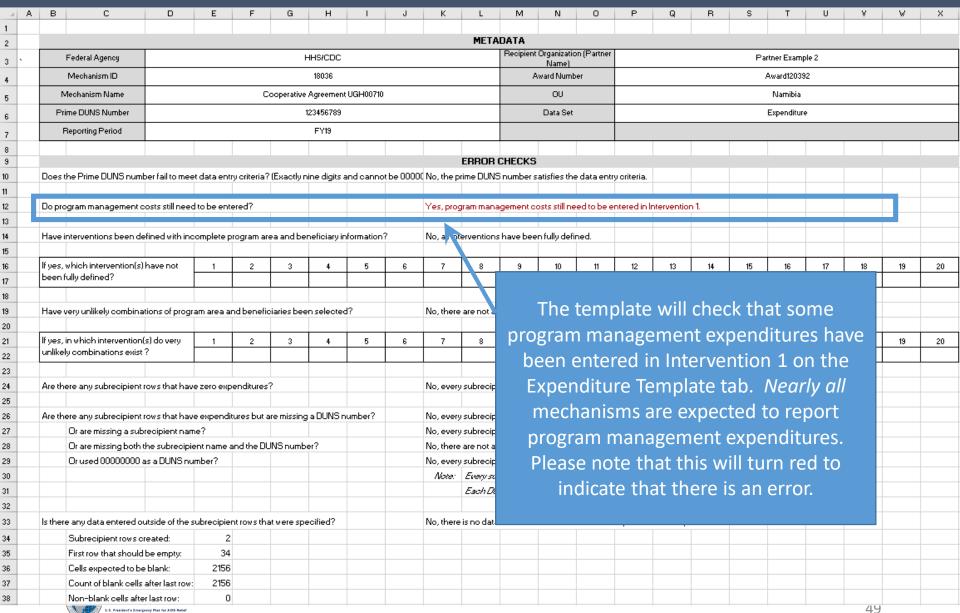


⊿ A	В	С	D	E	F	G	Н	1	J	K	L	М	N	0	Р	Q	R	S	Т	U	V	W	X		
1																									
2										METADATA Recipient Organization (Partner															
3 .		Federal Agency					HHS/CDC					Recipient	Organizatio Name)	n (Partner			Partner Example 2								
4		Mechanism ID					18036					А	ward Numb	er			Award120392								
5	N	lechanism Name			Co	operative	Agreement	UGH00710					OU						Namibia						
6	Pri	me DUNS Number				1	123456789						Data Set				Expenditure								
7	F	Reporting Period					FY19																		
8																									
9											ERROR	CHECKS													
0	Does th	ne Prime DUNS number	fail to meet d	ata entry o	riteria? (Ex	actly nine	digits and	cannot be 0	0.00000	O No, the pr	rime DUNS	number sat	isfies the da	ata entry cr	riteria.										
1																									
2	Do pro	gram management cost	ts still need to	be entere	d?					To	cor	rect	this	erro	r e	nter									
3																									
4	Have in	nterventions been defin	ed with incon	nplete pro	gram area a	nd benefic	iary inforn	nation?		t	:he c	corre	ct Pr	ime	DU	NS									
5																									
16	If yes,	which intervention(s) h	ave not been	1	2	3	4	5	6	าเ	ımbe	er th	at is	exac	ctly	nine	14	15	16	17	18	19	20		
7	fully de	efined?																							
8											(digits	s but	is n	ot										
9	Have v	ery unlikely combination	ons of prograi	m area and	d beneficiar	ies been se	elected?					000	2000	000											
0												UUL	0000	UUU.											
1		n which intervention(s		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20		
2	unlikel	y combinations exist?	1																						
3																									
4	Are the	re any subrecipient rov	ws that have z	ero expen	ditures?					No, every	subrecipie	ent has beer	assigned a	non-zero e	expendit	ure.									
5																									
6	Are the	re any subrecipient ro	ws that have e	xpenditur	es but are n	nissing a D	UNS numbe	er?		No, every	subrecipie	ent row with	expenditur	es contain	s a DUNS	number.									
7		Or are missing a subr	ecipient name	?						No, every	subrecipie	ent row with	expenditur	h.											
8		Or are missing both th	ne subrecipier	nt name an	d the DUNS	number?				No, there	are not any	y subrecipi	ent rows wit	th expendit	tures tha	t are missing	both a na	me and a D	UNS numbe	er.					
29		Or used 00000000 as	a DUNS numb	er?						No, every subrecipient row with expenditures contains a DUNS number.															
30										Note:	Every sub	recipient mu	ist have a vo	alid name a	and DUNS	number. TBD	subrecipie	ents are not	permitted.						
31											Each DUN	IS number n	ust be exac	tly 9 digits,	including	leading zero	es.								
32																									







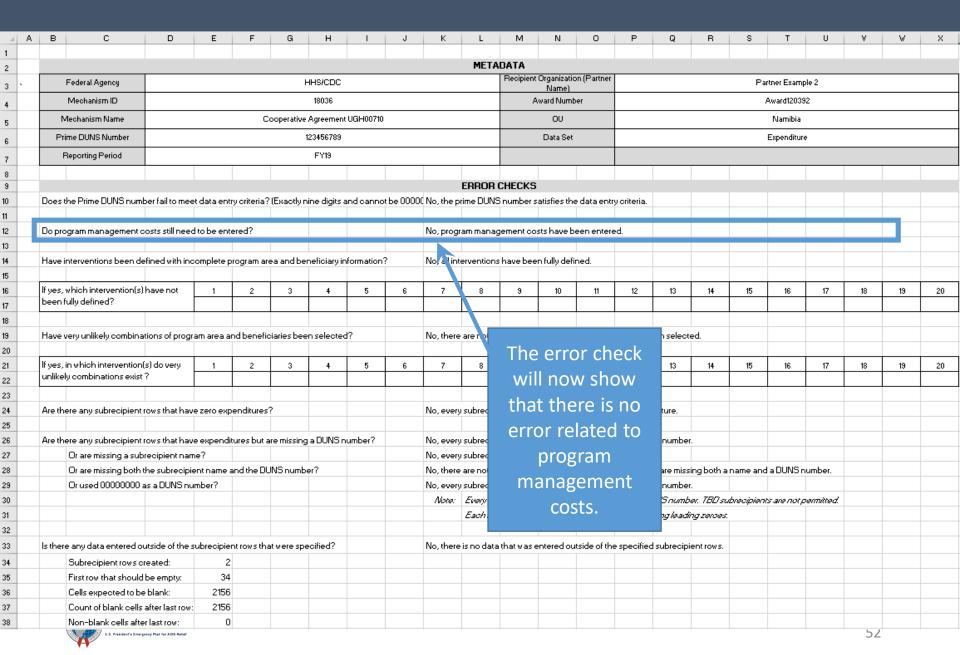


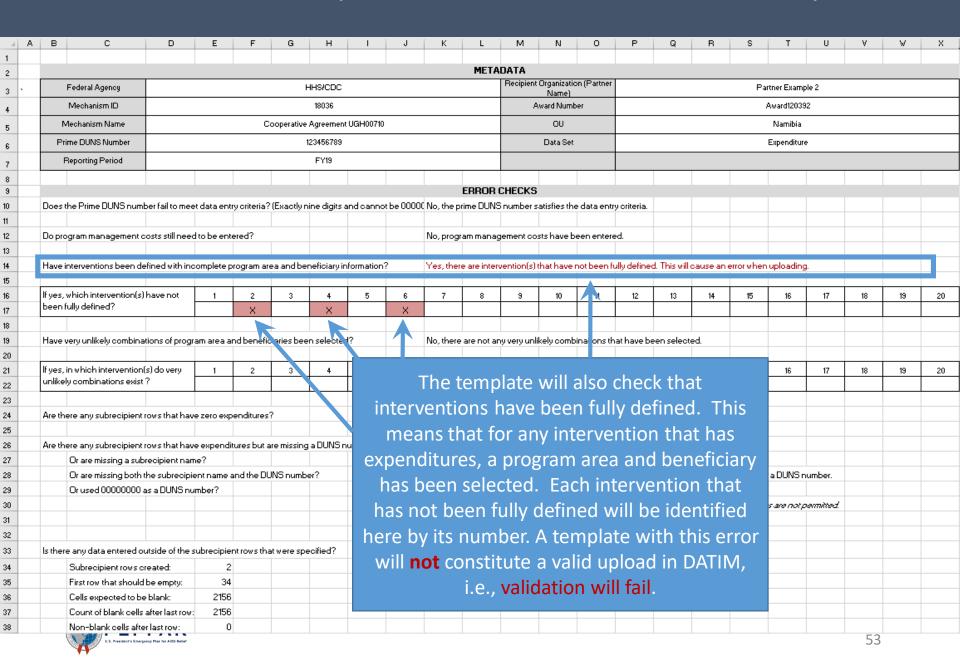
	1	В	С	D	Е		F	G	Н
1									
2				Program Management	Categoriza Interven		Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5
3	Inte	ervention Name (optional)		Program Management					
4	Pro	ogram Area	Program Management	SE: Ecor strengthe		SE: Psychosocial support-SD	SE: Case Management-SD	SE: Education assistance-SD	
5	Bei	neficiary	Non-Targeted Pop: Not disaggregated	Females: women & ad fema	dolescent	Females: Young women & adolescent females	Females: Young women & adolescent females	Females: Young women & adolescent females	
6	Cos	t Category		Program management expenditures	Expenditure Interver		correct this; first return t	enditures against Intervention 4	Expenditures against Intervention 5
7	P	ersonnel: Salaries- Health Care Worke	NA				.0		
8	P	ersonnel: Salaries- Other Staff			\$296,	the	Expenditure	\$48,408	\$73,459
9	_	ringe Benefits			\$75,4			\$11,058	\$16,048
10		ravel: International Travel				ren	nplate tab. As		
11		ravel: Domestic Travel			\$35,8	We	e saw on the	\$5,480	
12	_	quipment: Health Equipment							
13		quipment: Non-Health Equipment		r = -e = -		M	etadata and		
14		upplies: Pharmaceutical		NA		Erre	or Checks tab		
15	_	upplies: Health- Non Pharmaceutical		NA					
16	_	upplies: Other Supplies			\$36,8	Inte	rvention 1 ha	\$3,450	
17		ontractual: Contracted Health Care Wo	orkers	NA					
18	_	ontractual: Contracted Interventions		NA		no	expenditures	\$40,000	\$250,999
19	C	ontractual: Other Contracts					entered.		
20		onstruction					chicicu.		
21	_	raining						\$154,805	\$23,499
22	_	ubrecipient Total		NA	\$0)	\$0	\$0	\$0
23	-	ther: Financial Support for Beneficiari	es		\$450,	000			
24	0	ther: Other							
25	In	ndirect Charges			N/	N .	NA	NA	NA
26	Total Expenditures per Intervention (Sum of Cost Categories)		\$0	\$894,	441	\$109,661	\$263,201	\$364,005	



	Α	В	С	D	Е		F	G	Н
1									_
2				Program Management	Categoriza Interver		Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5
3	Interve	ention Name (optional)		Program Management					
4	Progra	am Area	Program Management	SE: Ecor strengthe		SE: Psychosocial support-SD	SE: Case Management-SD	SE: Education assistance-SD	
5	Benef	neficiary		Non-Targeted Pop: Not disaggregated	Females: women & ad fema	dolescent	Females: Young women & adolescent females	Females: Young women & adolescent females	Females: Young t women & adolescent females
6	Cost C	Category	Program management expenditures	Expenditure Interver			enditures against Intervention 4	Expenditures against Intervention 5	
7	Perso	onnel: Salaries- Health Care Worke	NA		To	correct this			
8	Perso	onnel: Salaries- Other Staff		\$315,057	\$296,			\$48,408	\$73,459
9	Fring	ge Benefits		\$78,192	\$75,4	erro	or, enter FY19	\$11,058	\$16,048
10	Trave	el: International Travel		\$15,700			nrogram		
11	Trave	el: Domestic Travel		\$24,800	\$35,8		program	\$5,480	
12	Equip	pment: Health Equipment				m	anagement		
13		pment: Non-Health Equipment		\$10,000					
14		olies: Pharmaceutical		NA		e	kpenditures,		
15		olies: Health- Non Pharmaceutical		NA		incl	uding indirect	-	
16		olies: Other Supplies		\$16,580	\$36,8			33,430	
17		ractual: Contracted Health Care Wo	orkers	NA		costs	s, if applicable	e. <u> </u>	
18		ractual: Contracted Interventions		NA				\$40,000	\$250,999
19		ractual: Other Contracts		\$9,985					
20		struction							
21	Train							\$154,805	\$23,499
22		ecipient Total		NA	\$0		\$0	\$0	\$0
23		er: Financial Support for Beneficiari	es		\$450,	000			
24		er: Other							
25	Indir	rect Charges		\$320,458	N/A	4	NA	NA	NA
26	Total Expenditures per Intervention (Sum of Cost Categories) \$790,77			\$790,772	\$894,	441	\$109,661	\$263,201	\$364,005





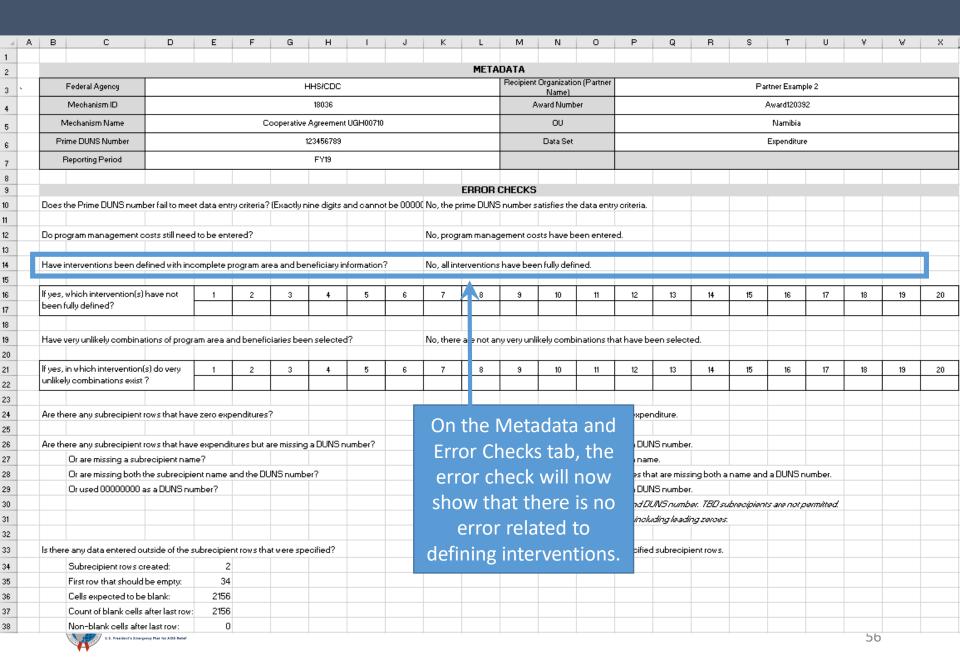


4	A B	С		D		E	F		G	Н	I
1											
2				Program anagement	(Categorization of Intervention 2	Categorizat Interventi		Categorization of Intervention 4	Categorization of Intervention 5	Categorization of Intervention 6
3	Intervention Name (optional)		Program Management			ategorization of Intervention 2	Categorization of Intervention 3		Categorization of Intervention 4	Categorization of Intervention 5	Categorization of Intervention 6
4	Program Area		Program Inagement	st	SE: Economic trengthening-SD	SE: Psychosocial support-SD		1	SE: Legal, human rights & protection- SD	1	
5	Beneficiary		Non-Targeted Pop: Not disaggregated			<u> </u>	Females: \ women adolescent f	&	Females: Young women & adolescent females	Males: Young mon & adolescent hales	A
6	Cost Category			ım management kpenditures	E	penditures against Intervention 2	Expenditures Interven		Expenditures against Intervention 4	Expenditures against Intervention 5	Expenditures against Intervention 6
7	Personnel: Salaries- Health Care Work	ers	NA								
8	Personnel: Salaries- Other Staff	\$1,000			\$296,253	\$ 65,80	8(\$48,408	\$43,883	\$29,372	
9	Fringe Benefits					\$75,480	\$15,40	8	\$11,058	\$2,454	
10	Travel: International Travel										
11	Travel: Domestic Travel				_			8	\$5,480	\$12,930	
12	Equipment: Health Equipment			_			c				
13	Equipment: Non-Health Equipment			To corr	e	ct this erro	r, first				
14	Supplies: Pharmaceutical			roture.	١.	the Funer	مريانا				
15	Supplies: Health-Non Pharmaceutical			return	ιΟ	the Exper	laiture				
16	Supplies: Other Supplies			Templa	ata	e tab. As w	A COM	7	\$3,450	\$23,543	
17	Contractual: Contracted Health Care V	Vorkers									
18	Contractual: Contracted Interventions	5		on the	2 0	n the Met	adata		\$40,000		
19	Contractual: Other Contracts									_	
20	Construction			and E	-rr	or Checks	tab, _				
21	Training								\$154,805		
22	Subrecipient Total			mterve	en	tions 2, 4,	and b	0	\$35,000	\$0	\$0
23	Other: Financial Support for Beneficiar	ries		have	Δr	not been f	illy				
24	Other: Other										
25	Indirect Charges		define	d_	This will a	lso be	0	NA	NA	NA	
26	Total Expenditures per Intervention (Sum				ed in red o		1	\$298,201	\$82,810	\$29,372	
					ure Templa						



	Α	В	С	D		Е	F	G	Н	1
1										
2				Program Management	C	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5	Categorization of Intervention 6
3	Interve	ention Name (optional)		Program Management						
4	Progra	am Area		Program Management	S	SE: Economic strengthening-SD	SE: Psychosocial support-SD	SE: Case Management-SI	SE: Education D assistance-SD	
5	Benef	iciary		Non-Targeted Pop: Not disaggregated		Females: Young men & adolescent females	Females: Young women & adolescent females	Females: Young women & adolesc females	Females: Young ent women & adolescent females	
6	Cost C	ategory		Program management expenditures	E	penditures against Intervention 2	Expenditures against Intervention 3	Expenditures again Intervention 4	st Expenditures against Intervention 5	Expenditures against Intervention 6
7	Perso	onnel: Salaries- Health Care Worke	ers	NA						
8		onnel: Salaries- Other Staff		\$315,057		\$296,253	\$65,808	\$48,408	\$73,459	
9	Fring	e Benefits						\$11,058	\$16,048	<u> </u>
10	Trave	el: International Travel	To d	correct this e	rro	or, select a	beneficiary			
11		el: Domestic Travel						\$5,480		
12		oment: Health Equipment	tor l	ntervention	2,	select a p	rogram area			
13		oment: Non-Health Equipment	200	d beneficiary	f	ar Intorvon	tion 1 and			
14	<u> </u>	lies: Pharmaceutical	and	a beneficially	IC	Ji ilitel veli	ition 4, and			
15		lies: Health- Non Pharmaceutical	de de	elete the erro	วท	eous fring	e henefits			
16		lies: Other Supplies						ş3,450		
17		ractual: Contracted Health Care Wo	orkers amo	ount in Interv	/ei	ntion 6. If	the amount	040.000	4050.000	
18		ractual: Contracted Interventions	:	lotor costion			tod octual	\$40,000	\$250,999	
19		ractual: Other Contracts		Intervention	ו כ	represen	ted actual			
21		truction		xpenditures,	+k	nis error ca	n also he	\$154.805	¢22.400	
22	Train	ong ecipient Total						\$154,805	\$23,499 \$0	\$0
23		r: Financial Support for Beneficiari	cor	rected by ide	ent	tifying a pr	ogram area	ŞU	ŞU	ŞU
24		r: Other	ics							
25		ect Charges	an	nd beneficiary	y I	or that int	ervention.	NA	NA NA	NA
26		Expenditures per Intervention (Sur	m of Cost Catogories)	\$790,772		6904 441	\$100.661			\$0
20	TOTAL	xpenditures per intervention (sur	ii oi cost categories)	\$130,112		\$894,441	\$109,661	\$263,201	\$364,005	ŞU





- 4	Α	В С	D	E	F	G	Н	1	J	K	L	М	N	0	Р	Q	R	S	Т	U	٧	V	×	
1																								
2											META	DATA												
3		Federal Agency				ŀ	HS/CDC					Recipient	Organizatio Name)	on (Partner				Pa	rtner Examp	ole 2				
4		Mechanism ID					18036					F	ward Numb)er					Award12039)2				
5		Mechanism Name			С	ooperative	Agreemen	UGH00710					OU						Namibia					
6		Prime DUNS Number					123456789			Data Set					Expenditure									
7		Reporting Period					FY19																	
8																								
9										ERROR CHECKS														
10		Does the Prime DUNS numb	per fail to me	et data eni	try criteria?	(Exactly n	ine digits a	and canno	t be 0000	00 No, the p	rime DUN	3 numbers	atisfies the	e data entr	y criteria.									
11																								
12		Do program management costs still need to be entered?								No, prog	ram mana	gement co	sts have b	een entere	ed.									
13																								
14		Have interventions been defined with incomplete program area and beneficiary information?								No, all in	tervention:	s have bee	n fully defi	ned.										
15																								
16		If yes, which intervention(s) I	have not	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
17		been fully defined?																						
18																								
19		Have very unlikely combinat		Yes, ver	unlikely o	ombinatio	ns have be	en selecte	ed. This wil	produce	a warning	when uplo	ading.											
20		K	-1					_												T				
21		If yes, in which intervention(; unlikely combinations exist *		<u> </u>	2	3	4 X	5	6	+4	8	9	10	11	12	13	14	15	16	17	18	19	20	
22 23							^																	
24		Are there any subrecipient r	ows that hav	⊥ ve zero ext	i penditures	?																		
25										Th	o tor	mnla	to w	عاد الا	o ch	ock t	hat	intor	vont	ions				
26		Are there any subrecipient r	ows that hav	ve expend	itures but a	re missino	a DUNS n	umber?		111				ill als										
27		Or are missing a subr				_					have	e not	bee	n de	fined	wit	h ve	rv ur	ilikel	V				
28		Or are missing both t	he subrecipi	ient name	and the DL	JNS numb	er?																	
29		Or used 00000000 a	s a DUNS nu	umber?						con	nbin	ation	S Of	prog	ram	area	and	ben	епсь	aries				
30										F	or e	yamı	نا مار	f you	r nrc	ogran	n are	a ic	"PRE	-\/-				
31																								
32											VN	/IMC	-SD <u>,</u> "	a ve	ry ui	nlike	y be	nefic	ciary					
33	Is there any data entered outside of the subrecipient rows that were specified?																				,			
34		Subrecipient rows cr	eated:	2	2					con	IDIN	ation	wol	ла р	e re	emal	es: A	auit	won	nen."				
35		First row that should	be empty:	34							Fach	inte	rver	ition	that	has	a ve	rv lir	nlike	V				
36		Cells expected to be	blank:	2156	6																			
37		Count of blank cells								com	bina	tion	will	oe id	entil	ied l	nere	by it	s nu	mbe	r			
38		Non-blank cells after	r last row:)																			

4	A B	С	D	Е		F	(G	Н		1
1											
2			Program Management	Categorization of Intervention 2		tegorization of ntervention 3	_	zation of ention 4	Categoriza Interven		Categorization of Intervention 6
3	Intervention Name (optional)		Program Management								
4	Program Area		Program Management	SE: Economic strengthening-SD	l	: Psychosocial support-SD		Case ment-SD	SE: Educ assistan		
5	Beneficiary		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent females	l	emales: Young nen & adolescent females		geted Pop: ggregated	Females: women & ad femal	lolescent	
6	Cost Category		Program management expenditures	Expenditures against Intervention 2		enditures against Intervention 3		es against ntion 4	Expenditure: Intervent	_	Expenditures against Intervention 6
7	Personnel: Salaries- Health Car	e Workers	NA								
8	Personnel: Salaries- Other Staff	f	\$315,057	\$296,253		\$65,808	\$48 408		\$73,4	59	
9	Fringe Benefits		\$78,192	\$75,480		\$15,408	\$11	058	\$16,0	48	
10	Travel: International Travel		\$15,700								
11	Travel: Domestic Travel		\$24,800	\$35,817		To corre	ct thi	error	first		
12	Equipment: Health Equipment										
13	Equipment: Non-Health Equipm	ent	\$10,000			return to	o the I	xpend	diture		
14	Supplies: Pharmaceutical		NA								
15	Supplies: Health- Non Pharmac	eutical	NA			Templat	te tab.	As we	saw		
16	Supplies: Other Supplies		\$16,580	\$36,891		on the		-data	and .		
17	Contractual: Contracted Health		NA			on the	rvieta	iuala d			
18	Contractual: Contracted Interve	entions	NA			Frro	r Che	cks tak	,	999	
19	Contractual: Other Contracts		\$9,985								
20	Construction					Intervent	tion 4	contai	ned a		
21	Training			*-						99	4
22	Subrecipient Total		NA	\$0		very unli	Kely c	ombin	ation.		\$0
23	Other: Financial Support for Be	neficiaries		\$450,000		This will	alcok	o indi	catod		
24	Other: Other					TIIIS WIII	aiso r	e mui	cateu		
25	Indirect Charges		\$320,458	NA		in red or	n the F	xnend	liture		NA
26	Total Expenditures per Interven	tion (Sum of Cost Categories)	\$790,772	\$894,441					artur C	005	\$0
			I			Te	mplat	e tab.			



1	A B	С	D	E	F	G	Н		1
1									
2			Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5		rization of vention 6
3	Intervention Name (optional)		Program Management						
4	Program Area		Program Management	SE: Economic strengthening-SD	SE: Psychosocial support-SD	SE: Case Management-SD	SE: Education assistance-SD		
5	Beneficiary		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent females					
6	Cost Category		Program management expenditures	Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditues against Intervention 4	Expenditures against Intervention 5		tures against vention 6
7	Personnel: Salaries- Health Care Worker	rs	NA						
8	Personnel: Salaries- Other Staff		\$315,057	\$296,253	\$65,808	\$48, 1 08	\$73,459		
9	Fringe Benefits		\$78,192	\$75,480	\$15,408	044 >50	215.010		
10	Travel: International Travel		\$15,700						
11	Travel: Domestic Travel		\$24,800	\$35,817	\$12,548	To corre	ect this error		
12	Equipment: Health Equipment								
13	Equipment: Non-Health Equipment		\$10,000			select a be	eneficiary tha	at is	
14	Supplies: Pharmaceutical		NA			- not a	ory unlikely		
15	Supplies: Health- Non Pharmaceutical		NA			not a v	very unlikely		
16	Supplies: Other Supplies		\$16,580	\$36,891	\$15,897	combina	tion. Once t	he	
17	Contractual: Contracted Health Care Wo	orkers	NA						
18	Contractual: Contracted Interventions		NA			correct	beneficiary i	S	
19	Contractual: Other Contracts		\$9,985						
20	Construction					selected	d, the cell wi		
21	Training					bosom	white again		
22	Subrecipient Total		NA	\$0	\$0	become	e white again		\$0
23	Other: Financial Support for Beneficiarie		\$450,000						
24	Other: Other								
25	Indirect Charges		\$320,458	NA	NA	NA	NA		NA
26	Total Expenditures per Intervention (Sum	n of Cost Categories)	\$790,772	\$894,441	\$109,661	\$263,201	\$364,005		S0



A	Α	В	С	D	Е	F	G	Н	ı	J	K	L	М	N	0	Р	Q	R	S	Т	U	٧	W	X
1																								
2												META												
3	.		Federal Agency					HHS/CDC					Hecipient	Organizatio Name)	on (Partner									
4			Mechanism ID					18036					Α	ward Numb	er	Or	ı the	Met	cadat	ta an	d			
5		M	lechanism Name			С	ooperative	Agreement	UGH00710					OU		Er	ror (hocl	ks tal	h th				
6		Pri	me DUNS Number					123456789						Data Set										
7		F	Reporting Period					FY19								error check will now								
8																cho	+ b	at th	nere	aro	20			
9										ERROR CHECKS														
10		Doest	he Prime DUNS numb	oer fail to mee	et data entr	y criteria?	(Exactly n	nine digits a	ind canno	not be 00000 No, the prime DUNS number satisfies the date						er	rors	relat	ed to	o ver	·V -			
11																								
12		Do program management costs still need to be entered? No, program management costs have been entered.											een entere	un	пкету	con	nbina	ation	15.					
13				6 1 51 5							BL U.			6 11 1 6										
14 15		mave II	nterventions been de	rinea with inc	complete p	rogram ar	ea and be	nericiary in	rormation	f	INO, all int	erventions	have t ee	n fully defi	nea.									
16		lf ues. :	which intervention(s)	have not	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
17			ully defined?				<u> </u>	<u> </u>	Ť		<u> </u>	1	_ •	,	-"-				.~		- "-	<u> </u>	<u> </u>	
18																								
19		Have v	ery unlikely combina	tions of progra	am area ar	nd benefic	ciaries bee	en selected	l?		No, there	are not an	ıy very unli	ikely comb	inations th	at have be	en selecti	ed.						
20																								
21			n which intervention(1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
22		unlikel	y combinations exist	?																				
23																								
24		Are the	ere any subrecipient i	rows that have	e zero exp	enditures	?				No, every	subrecipi 	ent has be	en assign	ed a non-z	ero exper	nditure.							
25								D. 11.0								. 5.1								
26			ere any subrecipient i			ures but a	are missing	gaDUNSn	umber?						tures conta									
27 28			Or are missing a sub Or are missing both t	•		od the DI	INS pumb	er?							tures conta with expen			ina both a	name and	L La DUNS e	umber			
29			Or used 000000000 a			and the Dt	JINO HUMB	er:							with expen tures conta			_	name and	I CVIOU B	iailibei.			
30				22 2 20140 114							Note:				a valid nai				i brecipient	i Is are not o	i nermitted			
31														exactly 9 dt										
32																	_							
33		Is there any data entered outside of the subrecipient rows that were specified?									No, there is no data that was entered outside of the					specified	l subrecipi	ent rows.						
34			Subrecipient rows ci	reated:	2																			
35			First row that should	be empty:	34																			
36			Cells expected to be	blank:	2156																			
37		Count of blank cel		after last row:	2156																			
38			Non-blank cells afte	rlastrow:	0																	61		

Complete List of Very Unlikely Intervention Combinations: Prevention Program Area: VMMC

Prevention (PREV): VMMC

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PREV: VMMC-NSD Females: Girls PREV: VMMC-NSD Females: Not disaggregated PREV: VMMC-NSD Key Pops: Sex workers PREV: VMMC-NSD Key Pops: People who inject drugs PREV: VMMC-NSD Key Pops: Not disaggregated PREV: VMMC-NSD Pregnant & Breastfeeding Women: Not disaggregated PREV: VMMC-NSD Priority Pops: Not disaggregated PREV: VMMC-NSD Priority Pops: Not disaggregated PREV: VMMC-NSD OVC: Orphans & vulnerable children PREV: VMMC-NSD OVC: Care givers	PREV: VMMC-NSD	Females: Adult women
PREV: VMMC-NSD Females: Not disaggregated PREV: VMMC-NSD Key Pops: Sex workers PREV: VMMC-NSD Key Pops: People who inject drugs PREV: VMMC-NSD Key Pops: Not disaggregated PREV: VMMC-NSD Pregnant & Breastfeeding Women: Not disaggregated PREV: VMMC-NSD Priority Pops: Not disaggregated PREV: VMMC-NSD OVC: Orphans & vulnerable children PREV: VMMC-NSD OVC: Care givers	PREV: VMMC-NSD	Females: Young women & adolescent females
PREV: VMMC-NSD Key Pops: Sex workers PREV: VMMC-NSD Key Pops: People who inject drugs PREV: VMMC-NSD Key Pops: Not disaggregated PREV: VMMC-NSD Pregnant & Breastfeeding Women: Not disaggregated PREV: VMMC-NSD Priority Pops: Not disaggregated PREV: VMMC-NSD OVC: Orphans & vulnerable children PREV: VMMC-NSD OVC: Care givers	PREV: VMMC-NSD	Females: Girls
PREV: VMMC-NSD Key Pops: People who inject drugs PREV: VMMC-NSD Key Pops: Not disaggregated PREV: VMMC-NSD Pregnant & Breastfeeding Women: Not disaggregated PREV: VMMC-NSD Priority Pops: Not disaggregated PREV: VMMC-NSD OVC: Orphans & vulnerable children PREV: VMMC-NSD OVC: Care givers	PREV: VMMC-NSD	Females: Not disaggregated
PREV: VMMC-NSD Key Pops: Not disaggregated PREV: VMMC-NSD Pregnant & Breastfeeding Women: Not disaggregated PREV: VMMC-NSD Priority Pops: Not disaggregated PREV: VMMC-NSD OVC: Orphans & vulnerable children PREV: VMMC-NSD OVC: Care givers	PREV: VMMC-NSD	Key Pops: Sex workers
PREV: VMMC-NSD Pregnant & Breastfeeding Women: Not disaggregated PREV: VMMC-NSD Priority Pops: Not disaggregated PREV: VMMC-NSD OVC: Orphans & vulnerable children PREV: VMMC-NSD OVC: Care givers	PREV: VMMC-NSD	Key Pops: People who inject drugs
PREV: VMMC-NSD Pregnant & Breastfeeding Women: Not disaggregated PREV: VMMC-NSD Priority Pops: Not disaggregated PREV: VMMC-NSD OVC: Orphans & vulnerable children PREV: VMMC-NSD OVC: Care givers	PREV: VMMC-NSD	Key Pops: Not disaggregated
PREV: VMMC-NSD Priority Pops: Not disaggregated PREV: VMMC-NSD OVC: Orphans & vulnerable children PREV: VMMC-NSD OVC: Care givers	PREV: VMMC-NSD	
PREV: VMMC-NSD OVC: Orphans & vulnerable children PREV: VMMC-NSD OVC: Care givers	PREV: VMMC-NSD	Priority Pops: Not disaggregated
PREV: VMMC-NSD OVC: Care givers	PREV: VMMC-NSD	
	PREV: VMMC-NSD	
	PREV: VMMC-NSD	OVC & care givers: Not disaggregated



Complete List of Very Unlikely Intervention Combinations: Prevention Program Area: Opioid substitution therapy (MAT)

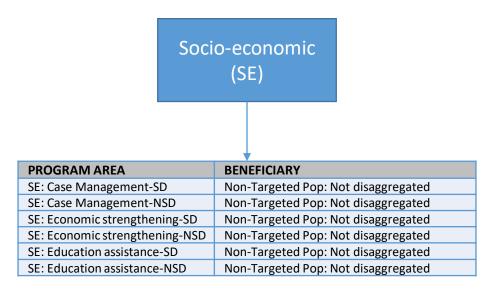


PROGRAM AREA	BENEFICIARY
PREV: Opioid substitution therapy-SD	Non-Targeted Pop: Not disaggregated
PREV: Opioid substitution therapy-SD	Non-Targeted Pop: Adults
PREV: Opioid substitution therapy-SD	Non-Targeted Pop: Young people & adolescents
PREV: Opioid substitution therapy-SD	Non-Targeted Pop: Children
PREV: Opioid substitution therapy-SD	Females: Adult women
PREV: Opioid substitution therapy-SD	Females: Young women & adolescent females
PREV: Opioid substitution therapy-SD	Females: Girls
PREV: Opioid substitution therapy-SD	Females: Not disaggregated
PREV: Opioid substitution therapy-SD	Males: Adult men
PREV: Opioid substitution therapy-SD	Males: Young men & adolescent males
PREV: Opioid substitution therapy-SD	Males: Boys
PREV: Opioid substitution therapy-SD	Males: Not disaggregated
PREV: Opioid substitution therapy-SD	Key Pops: Men having sex with men
PREV: Opioid substitution therapy-SD	Key Pops: Transgender
PREV: Opioid substitution therapy-SD	Key Pops: Sex workers
PREV: Opioid substitution therapy-SD	Key Pops: Not disaggregated
PREV: Opioid substitution therapy-SD	Pregnant & Breastfeeding Women: Not disaggregated
PREV: Opioid substitution therapy-SD	Priority Pops: People in prisons
PREV: Opioid substitution therapy-SD	Priority Pops: Military & other uniformed services
PREV: Opioid substitution therapy-SD	Priority Pops: Mobile Pops
PREV: Opioid substitution therapy-SD	Priority Pops: Displaced persons
PREV: Opioid substitution therapy-SD	Priority Pops: Clients of sex workers
PREV: Opioid substitution therapy-SD	Priority Pops: Not disaggregated
PREV: Opioid substitution therapy-SD	OVC: Orphans & vulnerable children
PREV: Opioid substitution therapy-SD	OVC: Care givers
PREV: Opioid substitution therapy-SD	OVC & care givers: Not disaggregated

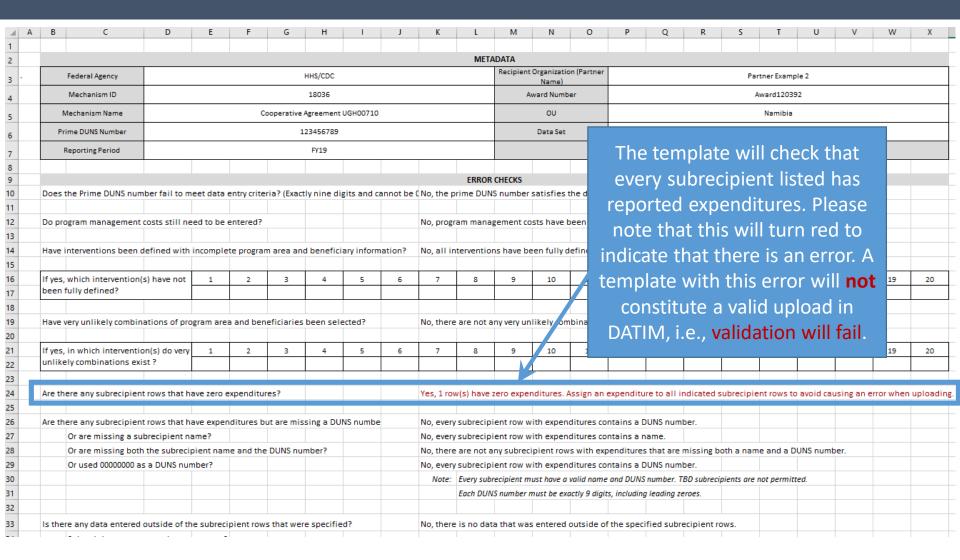
PROGRAM AREA	BENEFICIARY
PREV: Opioid substitution therapy-NSD	Non-Targeted Pop: Not disaggregated
PREV: Opioid substitution therapy-NSD	Non-Targeted Pop: Adults
PREV: Opioid substitution therapy-NSD	Non-Targeted Pop: Young people & adolescents
PREV: Opioid substitution therapy-NSD	Non-Targeted Pop: Children
PREV: Opioid substitution therapy-NSD	Females: Adult women
PREV: Opioid substitution therapy-NSD	Females: Young women & adolescent females
PREV: Opioid substitution therapy-NSD	Females: Girls
PREV: Opioid substitution therapy-NSD	Females: Not disaggregated
PREV: Opioid substitution therapy-NSD	Males: Adult men
PREV: Opioid substitution therapy-NSD	Males: Young men & adolescent males
PREV: Opioid substitution therapy-NSD	Males: Boys
PREV: Opioid substitution therapy-NSD	Males: Not disaggregated
PREV: Opioid substitution therapy-NSD	Key Pops: Men having sex with men
PREV: Opioid substitution therapy-NSD	Key Pops: Transgender
PREV: Opioid substitution therapy-NSD	Key Pops: Sex workers
PREV: Opioid substitution therapy-NSD	Key Pops: Not disaggregated
PREV: Opioid substitution therapy-NSD	Pregnant & Breastfeeding Women: Not disaggregated
PREV: Opioid substitution therapy-NSD	Priority Pops: People in prisons
PREV: Opioid substitution therapy-NSD	Priority Pops: Military & other uniformed services
PREV: Opioid substitution therapy-NSD	Priority Pops: Mobile Pops
PREV: Opioid substitution therapy-NSD	Priority Pops: Displaced persons
PREV: Opioid substitution therapy-NSD	Priority Pops: Clients of sex workers
PREV: Opioid substitution therapy-NSD	Priority Pops: Not disaggregated
PREV: Opioid substitution therapy-NSD	OVC: Orphans & vulnerable children
PREV: Opioid substitution therapy-NSD	OVC: Care givers
PREV: Opioid substitution therapy-NSD	OVC & care givers: Not disaggregated



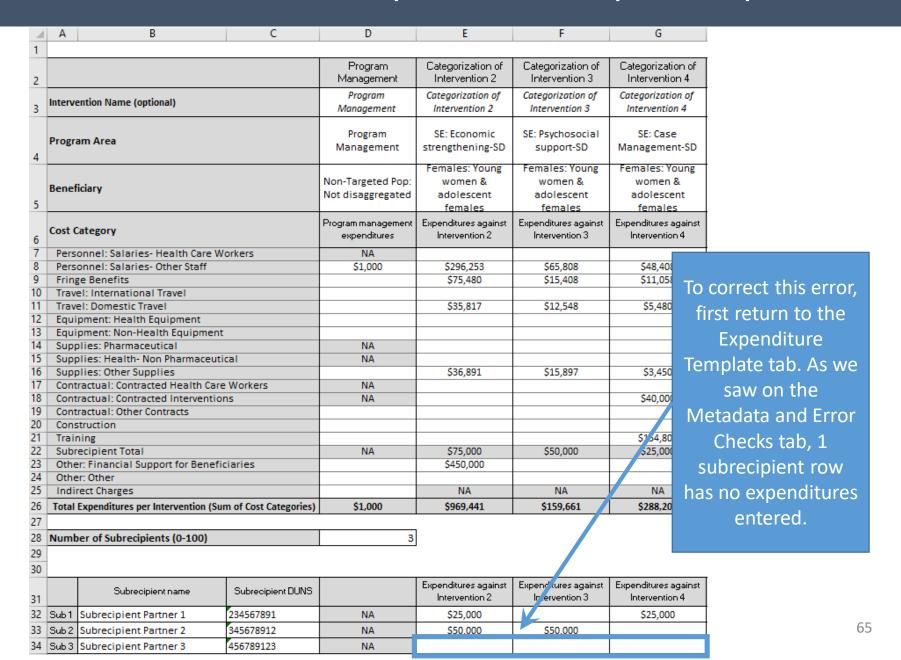
Complete List of Very Unlikely Intervention Combinations: Socio-economic Program Area





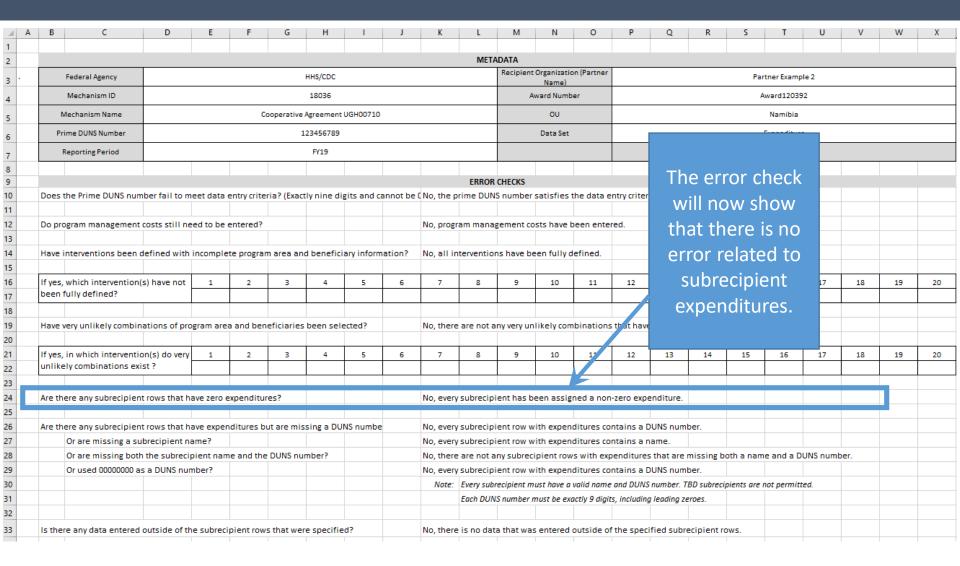




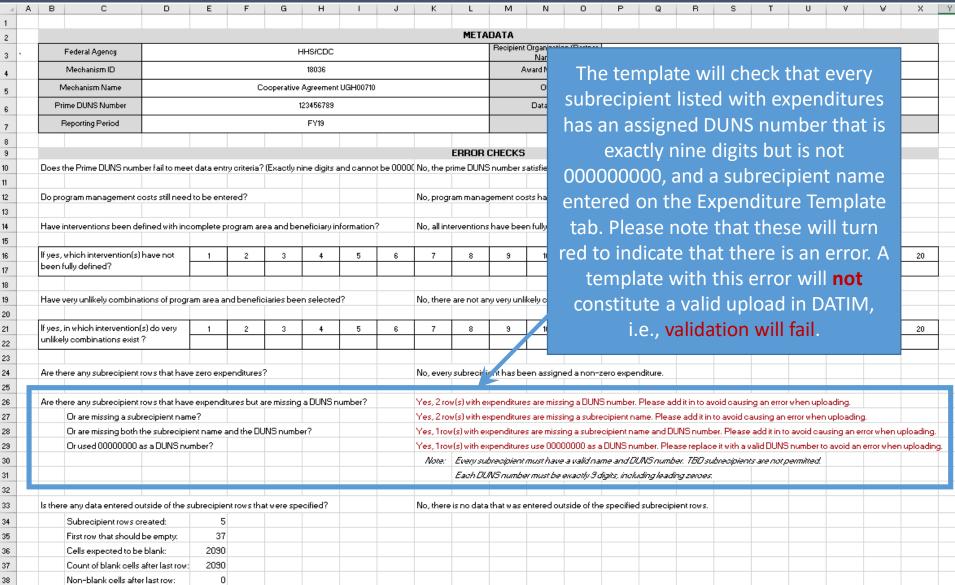


1	Α	A B C		D	E	F	G	
1								
				Program	Categorization of	Categorization of	Categorization	n of
2				Management	Intervention 2	Intervention 3	Intervention	14
		i N (iI)		Program	Categorization of	Categorization of	Categorization	of
3	interve	ention Name (optional)		Management	Intervention 2	Intervention 3	Intervention	4
				_				
	Progra	am Area		Program	SE: Economic	SE: Psychosocial	SE: Case	.co
4				Management	strengthening-SD	support-SD	Management	-50
					Females: Young	Females: Young	Females: You	ung
	Benef	iciary		Non-Targeted Pop:	women &	women &	women &	
5	Den.c.	.c.u. y		Not disaggregated	adolescent	adolescent	adolescen	t
				_	females	females	females	
	Cost C	Category		Program management	Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures ad	ainst I
6				expenditures	intervention 2	intervention 3	Intervention	To correct this error,
7		onnel: Salaries- Health Care W	orkers	NA		4	4	io correct this error,
8		onnel: Salaries- Other Staff		\$1,000	\$296,253	\$65,808	\$48,40	enter FY19
10		ge Benefits el: International Travel			\$75,480	\$15,408	\$11,05	
11		el: Domestic Travel			\$35.817	\$12.548	\$5,480	subrecipient
12		pment: Health Equipment			\$33,617	\$12,540	\$3,460	
13		pment: Non-Health Equipment						expenditures, if
14		olies: Pharmaceutical		NA				applicable or delete
15	Supp	olies: Health- Non Pharmaceuti	cal	NA				applicable, or delete
16	Supp	olies: Other Supplies			\$36,891	\$15,897	\$3,47	the erroneous Sub
17		ractual: Contracted Health Care		NA				the enomeous sub
18		ractual: Contracted Intervention	ns	NA			\$ 40,01	row and change the
19		ractual: Other Contracts						
20		struction					6154 04	Number of
21	Trair	recipient Total		NA	\$150,000	\$50,000	\$154 80 \$35 00	Cultura aimi a meta eta
23		er: Financial Support for Benefic	riaries	INA	\$450,000	\$30,000	\$33 50	Subrecipients to
24		er: Other			V 130,000			reflect the count of
25	Indi	rect Charges			NA	NA	JA	
26	Total	Expenditures per Intervention (Sur	m of Cost Categories)	\$1,000	\$1,044,441	\$159,661	\$2 8,2	subrecipients with
27								
28	Numb	per of Subrecipients (0-100)		3				expenditures entered.
29				_				
30	-							
30					Expenditures against	Expenditures against	Exper ditures ag	pingt
31		Subrecipient name Subrecipient DUNS			Intervention 2	Intervention 3	In ervention	
32	Sub 1	Subrecipient Partner 1	234567891	NA NA	\$25,000		\$25,000	
33				NA NA	\$50,000	\$50,000	\$25,000	66
						\$50,000	***************************************	
34	Sub3	Subrecipient Partner 3	456789123	NA	\$75,000		\$10,000	

1	Α	В	С	D	E	F	G		
1								_	
2				Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4		
3	Interv	ention Name (optional)		Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	1	
4	Progr	am Area		Program Management	SE: Economic strengthening-SD	SE: Psychosocial support-SD	SE: Case Management-SD		
5	Benef	iciary		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent females	Females: Young women & adolescent females	Females: Young women & adolescent females		
6	Cost (Category		Program management expenditures	Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against		
7	Pers	onnel: Salaries- Health Care W	orkers	NA			lo co	rrect this error,	
8		onnel: Salaries- Other Staff		\$1,000	\$296,253	\$65,808		enter FY19	
9	,	ge Benefits			\$75,480	\$15,408		enter F119	
10 11		el: International Travel el: Domestic Travel			\$35.817	\$12.548	<u> </u>	ubrecipient	
12		pment: Health Equipment			\$35,617	\$12,546			
13		pment: Non-Health Equipment					exp	penditures as	
14		olies: Pharmaceutical		NA					
15	Sup	olies: Health- Non Pharmaceuti	cal	NA			appili	cable, or delete	
16	Sup	olies: Other Supplies			\$36,891	\$15,897	tho	erroneous Sub	
17		ractual: Contracted Health Care		NA			uile (erroneous sub	
18		ractual: Contracted Intervention	ns	NA			row a	and update the	
19 20		tractual: Other Contracts							
21	Trai	struction						Number of	
22		ecipient Total		NA	\$75,000	\$50,000	Code		
23		er: Financial Support for Benefic	iaries	TVA	\$450,000	\$30,000	Suk	precipients to	
24		er: Other					roflo	ct the count of	
25	Indi	rect Charges			NA	NA	Telle	ct the count of	
26	Total	Expenditures per Intervention (Sur	m of Cost Categories)	\$1,000	\$9FJ,441	\$159,661	subr	ecipients with	
27					1				
28	Numl	per of Subrecipients (0-100)		2			expen	ditures entered.	
29					l				
30									
31		Subrecipient name	Subrecipient DUNS		Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4		
32	Sub1	Subrecipient Partner 1	234567891	NA	\$25,000		\$25,000	1	
33	Sub 2	Subrecipient Partner 2	345678912	NA	\$50,000	\$50,000]	6









\square	Α	В	С	D		E	F	G				
9	Fring	ge Benefits				\$75,480	\$15,408	\$11,058				
10	Trave	el: International Travel										
11	Trave	el: Domestic Travel				\$35,817	\$12,548	\$5,480				
12	Equip	pment: Health Equipment										
13	Equip	pment: Non-Health Equipment										
14	Supp	lies: Pharmaceutical		NA	NA							
15	Supp	lies: Health- Non Pharmaceutical		NA								
16		lies: Other Supplies				_						
17	Cont	ractual: Contracted Health Care Wo	orkers	NA		To correct	t this error, fir	st return				
18	Cont	ractual: Contracted Interventions		NA		to the F	Expenditure Te	mplate				
19	Cont	ractual: Other Contracts										
20	Cons	truction				tab.	As we saw on	tne				
21	Train	ning				Metadata	a and Error Ch	ecks tab.				
22		ecipient Total		NA		there are two rows missing a						
23		r: Financial Support for Beneficiari	es			there al	re two rows m	issing a				
24		r: Other				DUNS	number, two	rows				
25	Indir	ect Charges										
26	Total	Expenditures per Intervention (Sur	n of Cost Categories)	\$1,000								
27						and one	row where 000	0000000				
28	Numb	per of Subrecipients (0-100)		5		was iise	ed as a DUNS n	umher				
29						was asc		dilloci.				
30												
		Subrecipient name	Subrecipient DUNS		Expe	nditures against	Expenditures against	Expenditures against				
31		Subrecipient name	Sit precipient bons		In	tervention 2	Intervention 3	Intervention 4				
32	Sub 1	Subrecipient Partner 1		NA		\$25,000		\$25,000				
33	Sub 2		345678912	NA		\$50,000	\$50,000					
34	Sub 3	Subrecipient Partner 3	456789123	NA				\$10,000				
35	Sub 4		M	NA	\$50,000							
36	Sub 5	Subrecipient Partner 5	000000000	NA	\$5,000							



\square	Α	В	С	D		E	F	G				
9	Fring	e Benefits				\$75,480	\$15,408	\$11,058				
10	Trave	el: International Travel										
11	Trave	el: Domestic Travel				\$35,817	\$12,548	\$5,480				
12	Equip	oment: Health Equipment										
13		oment: Non-Health Equipment										
14		lies: Pharmaceutical		NA								
15		lies: Health- Non Pharmaceutical		NA								
16		lies: Other Supplies				To corre	ct this error, e	nter the				
17		ractual: Contracted Health Care Wo	orkers	NA		correc	t subrecipient	DLINS				
18		ractual: Contracted Interventions		NA								
19	Contr	ractual: Other Contracts				numbe	er that is exact	ly nine				
20		truction				digits h	out is not 0000	00000				
21	Train											
22		ecipient Total		NA		and subrecipient name for						
23		r: Financial Support for Beneficiari	es			ever	, subrecipient.	TRD				
24		r: Other										
25		ect Charges				subrecipi	ients, by defini	tion, did				
26	Total I	Expenditures per Intervention (Sur	n of Cost Categories)	\$1,000	\$	unding,						
27								<u> </u>				
28	Numb	er of Subrecipients (0-100)		5		and the	erefore should	not be				
29							entered.					
30												
					Expe	nditures against	Expenditures against	Expenditures against				
31		Subrecipient name	Subrecipient DUNS		In	tervention 2	Intervention 3	Intervention 4				
32	Sub 1	Subrecipient Partner 1	234567891	NA		\$25,000		\$25,000				
33	Sub 2	Subrecipient Partner 2	345678912	NA		\$50,000	\$50,000					
34	Sub 3	Subrecipient Partner 3	456789123	NA				\$10,000				
35	Sub 4	Subrecipient Partner 4	567891234	NA	\$50,000							
36	Sub 5	Subrecipient Partner 5	678912345	NA								



Please note: If subrecipient does not yet have a DUNS number at the time of reporting, use '111111111'.

A	Α	В	С	D	Е	F	G	Н	I	J	К	L	М	N	0	Р	Q	R	S	Т	U	٧	V	X		
1																										
2												META	DATA	Organizatio	n (Dastesa											
3	`	F	ederal Agency				F	HHS/CDC					mediplent	Organizatio Name)	nr (marcher				Pai	rtner Examp	ole 2					
4		ľ	/lechanism ID					18036					A	ward Numb	er				-	Award12039)2					
5		Me	chanism Name			С	ooperative	Agreement	UGH00710					OU						Namibia						
6		Prim	e DUNS Number				1	23456789					Data Set Expenditure							e						
7		Be	porting Period					FY19																		
8																										
9													CHECKS													
10	- 1	Does the Prime DUNS number fail to meet data entry criteria? (Exactly nine digits and cannot be 00000 No, the prime DUNS number satisfies the data entry criteria.																								
11																										
12	- 1	Do prog	ram management c	costs still need	d to be en	itered?					No, progr	am mana;	gement co	sts have be	een entere	ed.										
13																	T	he er	ror o	chec	k -					
14		Have in	terventions been de	efined with inc	complete p	program ar	ea and ber	neficiary in	formation?	?	No, all int	ervention:	s have bee	n fully defir	ned.											
15																	V	vill n	ow s	now	-					
16			hich intervention(s) lly defined?	l have not	1	2	3	4	5	6	7	8	9	10	11	12	+1	nat th	horo	18	19	20				
17		beeiiia	illy defil led :														LI	ומנ נו								
18																	error related to									
19		Have ve	ry unlikely combina	ations of progr	ram area a	and benefic	ciaries bee	n selected	l?		No, there	are not a	ny very unli	kely combi	inations th	at have be	٩									
20																	4	subr	ecipi							
21			which interventions combinations exist		1	2	3	4	5	6	7	8	9	10	11	12	-			-	18	19	20			
22		urlikely	COMBINATIONS EXIST	:													-	ae	etails		-					
23							_																			
24		Are the	e any subrecipient	rows that hav	e zero exp	penditures	?				No, every	subrecip	ient has be	en assigne	ed a 10 1-2	zero expen	d									
25				.1 .1		l. I .		DUNG								. 50.00										
26			e any subrecipient			litures but a	are missing	a DUNO n	umber?							ains a DUN										
27			Or are missing a sub			5										ains a nam				50.00						
28			Or are missing both			and the DU	JNS numbe	er?								ditures tha			name and	laDUNSr	iumber.					
29		- '	Or used 000000000 a	as a DUNS nu	umber?									•		ains a DUN										
30											/Note:					me and DU				's are not p	ermitte.	ž.				
31	-	Each DUNS number must be exactly 9 digits, in										tigits, inclui	ding leadii	ng zeroes.												
32																										
33	Is there any data entered outside of the subrecipient rows that were specified? No, there is no data the										a that was e	entered out	tside of the	e specified	subrecipi	ent rows.										
34			Subrecipient rows c			2																				
35			irst row that should		34																					
36			Cells expected to be		2156	_																				
37			Count of blank cells																							
38			Von-blank cells afte			ם																	2			
	U.S. President's Energiancy Plan for AIDS Relial																	/2	_							

al	Α	в с	D	Е	F	G	Н	1	J	K	L	М	N	0	Р	Q	R	S	Т	U	٧	V	×
1																							
2											META	ADATA Recipient	Organizati	ion (Partner	Г								
3	`	Federal Agency					HHS/CDC					riecipieno	Name)	ion (i aithei				Par	rtner Examp	ole 2			
4		Mechanism ID					18036					٨	ward Num	ber					Award12039	12			
5		Mechanism Name			C	ooperative	Agreement	UGH00710					OU						Namibia				
6		Prime DUNS Number					123456789					Data Set Expenditure											
7		Reporting Period					FY19																
8																							
9												CHECKS											
10		Does the Prime DUNS numb	er fail to mee	et data entr	ry criteria?	(Exactly r	ine digits a	and canno	t be 0000	(No, the p	rime DUN:	5 numbers	atisfies th	ne data entr	y criteria.								
11		.		1. 1 .	10																		
12		Do program management c	osts still need	to be ente	ered (No, prog	ram mana	gement co		Thot	ome	lata	 برنالہ	chool	 ,	+ all			
14		Have interventions been de	fined with inc	complete n	rogram are	a and be	neficiamir	formation'	2	No allio	teruention	⊥ s have bee	n ful	The t									
15		riave interventions been de	inied withinio	Joinpiete p	rogram ar		nenoiary ii	i cimation		140, 41111	ier v erkion	Jilave Dee		sub	recip	oient	data	a is e	nter	ed			
16		If yes, which intervention(s)	have not	1	2	3	4	5	6	7	8	9									18	19	20
17		been fully defined?												\	withi	n th	e aes	signa	itea				
18														SU	ibrec	iniei	nt ro	ws o	n the	_			
19		Have very unlikely combinat	tions of progr	am area ar	nd benefic	iaries bee	n selected	!?		No, there	are not a	ny very unli	kely										
20														EX	pend	iture	e Ien	nplat	te tal	b.			
21		If yes, in which intervention(; unlikely combinations exist 1	. ,	1	2	3	4	5	6	7	8	9		Plea	se no	nte t	hat t	his v	will ti	ırn	18	19	20
22		ar likely combinations exist	:																		_		
23		Are there any subrecipient r				,				NI		ient has be		red t	o inc	dicat	e tha	at the	ere is	an			-
24 25		Are there any subrecipient r	ows that hav	e zero exp	enaltures	f				No, ever	ysubrecip	ient nas be		error.	A to	mnl	ato v	vith t	thic c	rror			
26		Are there any subrecipient r	ows that hav	e exnendit	i rures hut a	re missino	i aDUNSh	umber?		No ever	u subrecin	ient row wit	h eu										
27		Or are missing a subr					,					ient row wit	he. V	vill n o	ot co	nstit	ute	a val	id up	loac			
28		Or are missing both t	•		and the DL	INS numb	er?			No, there	are not a	ny subrecij											
29		Or used 00000000 a	s a DUNS nu	ımber?						No, ever	y subrecip	ient row vit	h ex	n DA	ı IIVI,	ı.e.,	vallu	atioi	ı wıı	ı ıaıı			
30										Note:	Everysu	ibrec Jient	must hav	e a validna	me and DU	NS numb	er. 150 su	brecipient	s are not p	ermitted.			
31											Each DL	W I numbe	r must be	екасту 9 а	ligits, inclui	ding leadi	ng zeroes.						
32																							-
33		Is there any data entered ou				at were spe	ecified?			Yes, the	re are 4 va	lue(s) that	must be d	leleted.									
34		Subrecipient rows or		2																			_
35		First row that should		34																			
36		Cells expected to be		2156																			-
37		Count of blank cells		2152																			
38		Non-blank cells after		4																			

	Α	В	С	D	E	F	G	
1								
2				Program Management	Categorization of Intervention 2	Categorization of Intervention 3	of Categorization of Intervention 4	
3	Interv	ention Name (optional)		Program Management	Categorization of Intervention 2	Categorization of Intervention 3	f Categorization of Intervention 4	
4	Progr	am Area		Program Management	SE: Economic strengthening-SD	SE: Psychosocia support-SD	SE: Case Management-SD	
5	Benef	ficiary		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent females	Females: Young women & adolescent females	Females: Young women & adolescent females	
6	Cost (Category		Program management expenditures	Expenditures against Intervention 2	Expenditures again Intervention 3	nst Expenditures against Intervention 4	
7	Pers	onnel: Salaries- Health Care W	orkers	NA				
8		onnel: Salaries- Other Staff		\$1,000	\$296,253	\$65,808	To correct thi	is array first ratius
9	,	ge Benefits			\$75,480	\$15,408	io correct thi	is error, first return
10 11		el: International Travel			Ć25 047	Ć12 F40	to the Evne	nditure Template
12		el: Domestic Travel ipment: Health Equipment			\$35,817	\$12,548	to the Expe	nuiture rempiate
13		ipment: Non-Health Equipment	•				tab. As v	ve saw on the
14	_	plies: Pharmaceutical	<u> </u>	NA NA				
15		plies: Health- Non Pharmaceuti	ical	NA			Metadata an	d Error Checks tab,
16	Sup	plies: Other Supplies			\$36,891	\$15,897		
17	Cont	tractual: Contracted Health Care	e Workers	NA			4 cells conta	in values after the
18		tractual: Contracted Interventio	ns	NA			lact cubracia	iant row specified
19		tractual: Other Contracts					iast subrecip	ient row specified.
20		struction					This hannens	when the Number
21	Trai			BIA.	Ć150.000			
22		recipient Total er: Financial Support for Benefi	riaries	NA	\$150,000 \$450,000	\$50,000	of Subrecir	pients is reduced
24		er: Other	ciaries		\$430,000			
25		rect Charges			N/	NA	prior to dele	eting values in the
26		Expenditures per Intervention (Su	m of Cost Categories)	\$1,000	\$1 J44,441	\$,59,661	dalatar	d Sub row(s).
27					1		deletet	Jub Tow(3).
28	Numb	ber of Subrecipients (0-100)		2		_		
29					1			
30								
31		Subrecipient name	Subrecipient DUNS		Expenditures against Intervention 2	Expenditures again Intervention 3	est Expenditures against Intervention 4	
32	Sub1	Subrecipient Partner 1	234567891	NA	\$25,000		\$25,000	
33	Sub 2	Subrecipient Partner 2	345678912	NA	\$50,000	\$50,000		7
34		Subrecipient Partner 3	456789123		\$75,000		\$10,000	

4	Α	В	С	D	E	F	G		
1									
2				Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4		
3	Interve	ention Name (optional)		Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4		
4	Progra	am Area		Program Management	SE: Economic strengthening-SD	SE: Psychosocial support-SD	SE: Case Management-SD		
5	Benef	iciary		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent females	Females: Young women & adolescent females	Females: Young women & adolescent females		
6	Cost C	Category		Program management expenditures	Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4		
7	Pers	onnel: Salaries- Health Care W	orkers	NA					
8	Pers	onnel: Salaries- Other Staff		\$1,000	\$296,253	\$65,808	\$48,408		
9		ge Benefits			\$75,480	\$15,408	\$11,058		
10		el: International Travel							
11		el: Domestic Travel			\$35,817		4		
12		pment: Health Equipment							
13		pment: Non-Health Equipment							
14		olies: Pharmaceutical		NA		To corre	ect this erro		
15		olies: Health- Non Pharmaceuti	cal	NA					
16		olies: Other Supplies			\$36,891	delete	the floatin		
17		ractual: Contracted Health Care		NA					
18		ractual: Contracted Intervention	ns	NA		valu	ies in the		
19		ractual: Other Contracts							
20		struction				<u> </u>	d Sub row(s		
21	Trair						المماميلات		
22		ecipient Total		NA	\$75,000	\blacksquare arte	er the last		
23		er: Financial Support for Benefic	iaries		\$450,000	cubro	ciniont row		
24		er: Other				Subre	cipient row		
25		rect Charges			NA	cn	ecified.		
26	Total	Expenditures per Intervention (Sur	n of Cost Categories)	\$1,000	\$96°,441	sp	ecineu.		
27									
28	Numb	per of Subrecipients (0-100)		2					
29									
30									
31		Subrecipient name	Subrecipient DUNS		Expenditures agains Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4		
32	Sub1	Subrecipient Partner 1	234567891	NA	\$25,000		\$25,000		
33		Subrecipient Partner 2	345678912	NA	\$50,000	\$50,000			
	Sub 2 Subrecipient Partner 2 3456/8912		1475	\$30,000	\$30,000				

al	Α	В С	D	Е	F	G	Н	ı	J	K	L	М	N	0	Р	Q	R	S	Т	U	٧	W	×		
1																									
2											META	ADATA	O'-												
3	`	Federal Agency				ŀ	HHS/CDC					Hecipient	Organiz Nam	zation (Partner ie)				Par	tner Examp	ole 2					
4		Mechanism ID					18036					Α	ward No	umber				A	\ward12039	rd120392					
5		Mechanism Name			С	ooperative	Agreement	UGH00710					OU						Namibia						
6		Prime DUNS Number					123456789					Data Set						Expenditure	e						
7		Reporting Period					FY19																		
8																									
9											ERROR	CHECKS													
10		Does the Prime DUNS numb	er fail to mee	et data enti	ry criteria?	(Exactly n	ine digits a	ind canno	t be 0000	No, the p	rime DUN	Snumbers	atisfies	the data entr	y criteria.										
11																									
12		Do program management co	osts still need	d to be ente	ered?					No, progr	ram mana	gement co	sts hav	e been entere	·d.										
13									_			<u> </u>													
14		Have interventions been de	fined with inc	complete p	rogram ar	ea and be	neficiary in	formation?	?	No, all int	ervention	s have bee	n fully d	defined.											
15		If yes, which intervention(s) I	l		_			-	_	-		—							40		40				
16 17		been fully defined?	nave not	1	2	3	4	5	6	7	8	9							16	17	18	19	20		
18																									
19		Have very unlikely combinat	tions of progr	am area ar	nd benefic	i arias has	n selected	12		No there	are not a	iny very unli	kalu	The e	rror	che	ck wil								
20		Thave very drinkery combinat	noris or progr	amarea a	na benen	Janes Dee	Tiseleotec			140, there	aleriote	ing very arm	ice iy												
21		If yes, in which intervention(s	s) do very	1	2	3	4	5	6	7	8	9		now s	now	una	uner	е —	16	17	18	19	20		
22		unlikely combinations exist		-	_				_					is no e	error	· rela	ited t	\circ							
23																									
24		Are there any subrecipient r	ows that hav	e zero exp	enditures	?				No, every	, subrecip	ient has be	en a	subre	cipi	ent v	<i>r</i> alues	S							
25														outsi	40.0	fcno	cifico	4							
26		Are there any subrecipient r	ows that hav	e expendit	tures but a	re missing	a DUNS n	umber?		No, every) subrecip	ient row wit	h ex												
27		Or are missing a subr	recipient narr	ne?						No, every) subrecip	ient row wit	he.	subre	ecipi	ent	rows.								
28		Or are missing both the			and the DU	JNS numb	er?			-		ıny subrecir						and	a DUNS n	umber.					
29		Or used 000000000 a	is a DUNS nu	ımber?								ient row vit													
30										Note:	-			ace a calid nai				brecipient	s are not p	ermitted.					
31											Each D	V numbe	r must i	be exactly 9 d	ligits, inalu	iding leadi	ing zeroes.								
32							· · · · · · · · · · · · · · · · · · ·			81 .1					ut:										
33		Is there any data entered ou		subrecipier 2	nt rows tha	at were spe	ecitied?			No, there	is no dat	a that was e	entered	doutside of the	specified	1 subrecip	ient rows.								
34 25		Subrecipient rows or		34																					
35 36		First row that should I		2156																					
37		Count of blank cells a																							
38		Non-blank cells after		. 2130																					
		U.S. President's Emerger																			//				

Fields on the Metadata and Error Checks Tab

Row & Column Name	Cell Reference	Description
Does the Prime DUNS number fail to meet data entry criteria?	K10	 This will check that the Prime DUNS number entered in the "Metadata" section on the Metadata and Error Checks tab is exactly nine digits but is not 000000000. IPs should not upload the template if there is not an exact match, since a template with this error will not constitute a valid upload in DATIM, i.e., validation will fail.
Do program management costs still need to be entered?	K12	 This will check that amounts have been entered in intervention 1 for program management costs. Nearly all mechanisms are expected to have program management expenditure, the few exceptions should be confirmed with USG Agency staff (AOR/COR/Project Officer) before ignoring this error.
Have interventions been defined with incomplete program area and beneficiary information?	K14	 This will check if all interventions have both a program, sub-program and service delivery or non combination and a beneficiary and sub beneficiary combination selected. If certain interventions are missing either program or beneficiary or both, this error check will identify the number of the intervention(s) that require further information. IPs should not upload the template if there is not an exact match, since a template with this error will not constitute a valid upload in DATIM, i.e., validation will fail.
Have very unlikely combinations of program area and beneficiaries been selected?	K19	 This will check if any interventions have a program area and beneficiary combination that is very unlikely given programmatic guidelines, for example if PREV: VMMC – SD is selected in combination with Females: Adult women. If certain interventions have very unlikely combinations, this error check will identify the number of the intervention(s) that require revision.



Fields on the Metadata and Error Checks Tab

Row & Column Name	Cell Reference	Description
Are there any subrecipient rows that have zero expenditures?	K24	 This will check that every subrecipient listed is assigned a non-zero expenditure. IPs should not upload the template if there is not an exact match, since a template with this error will not constitute a valid upload in DATIM, i.e., validation will fail.
Are there any subrecipient rows that have expenditures but are missing a DUNS number?	K26	 This will check that every subrecipient listed with expenditures has an assigned DUNS number entered on the Expenditure Template tab. IPs should not upload the template if there is not an exact match, since a template with this error will not constitute a valid upload in DATIM, i.e., validation will fail.
Or are missing a subrecipient name?	K27	 This will check that every subrecipient listed with expenditures has an assigned subrecipient name entered on the Expenditure Template tab. IPs should not upload the template if there is not an exact match, since a template with this error will not constitute a valid upload in DATIM, i.e., validation will fail.



Fields on the Metadata and Error Checks Tab

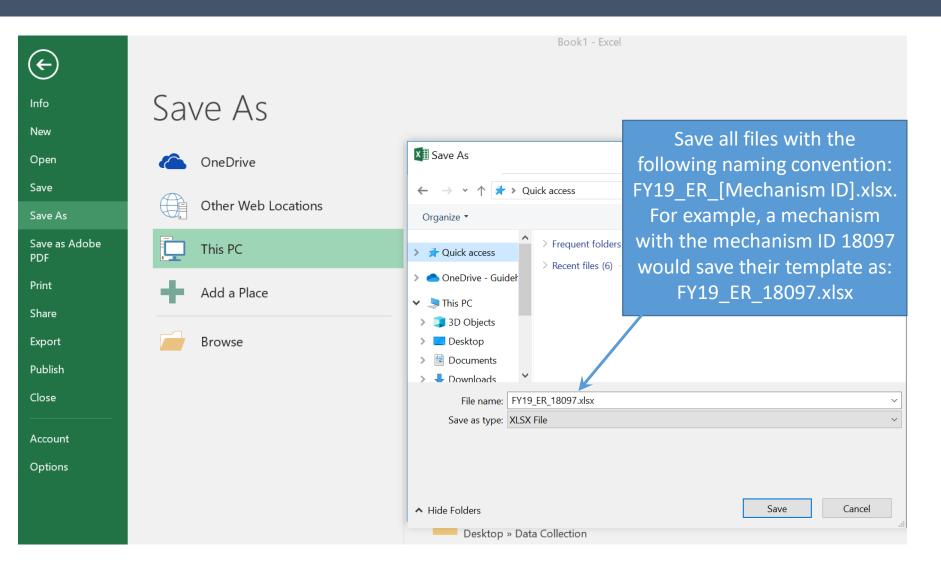
Row & Column Name	Cell Reference	Description
Or are missing both the subrecipient name and the DUNS number?	K28	 This will check that every subrecipient listed with expenditures has both an assigned DUNS number and subrecipient name entered on the Expenditure Template tab. IPs should not upload the template if there is not an exact match, since a template with this error will not constitute a valid upload in DATIM, i.e., validation will fail.
Or used 000000000 as a DUNS number?	К29	 This will check that every subrecipient listed with expenditures has an assigned DUNS number entered on the Expenditure Template tab that is exactly nine digits but is not 000000000. TBD subrecipients are not permitted.
		 If needed, follow up with prime recipient to determine DUNS number for subrecipient. DUNS numbers can be searched on the website SAM.gov. If the subrecipient does not yet have a DUNS number at the time of reporting, please use '111111111' to indicate the DUNS number is unknown. IPs should not upload the template if there is not an exact match, since a template with this error will not constitute a valid upload in DATIM, i.e., validation will fail.
Is there any data entered outside of the subrecipient rows that were specified?	K33	This will check that all subrecipient data is entered within the designated subrecipient rows. IPs should not upload the template if there is not an exact match, since a template with this error will not constitute a valid upload in DATIM, i.e., validation will fail.



Upload to DATIM and Submit

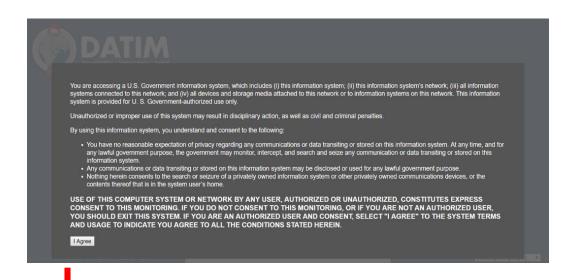


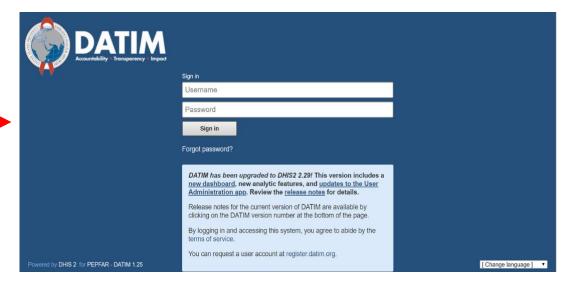
Save ER Template for Upload





DATIM Upload: Log Into DATIM

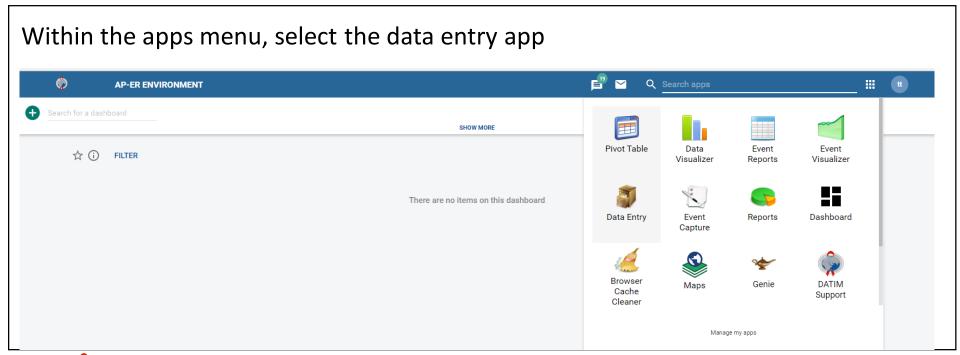






Navigate to Data Entry App

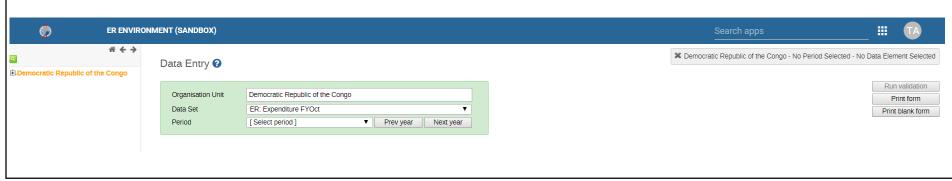






Verify OU

After selecting data entry app, the data entry page will appear:





NOTE: ER is reported at the OU level, regardless of whether the IP is only working in one SNU or multiple SNU; please make sure the OU is selected.

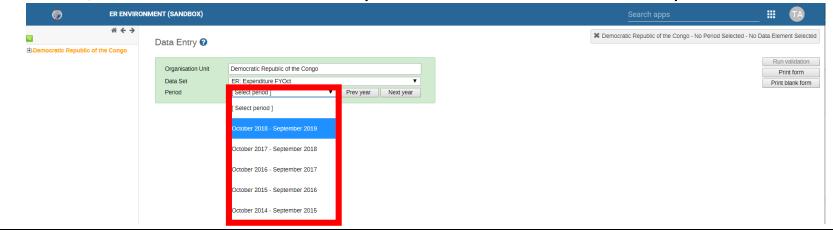


Enter Data Set and Period Information

For Data Set, select "ER: Expenditure FYOct" from the drop-down list



For Period, select "October 2018-September 2019" from the drop-down list



NOTE: If you select an earlier reporting period (e.g., October 2017 – September 2018), you will not be able to submit your expenditure reporting template in the Data Approval app, as the only option for data approval for this first ER reporting period in DATIM is October 2018 – September 2019.



Select Mechanism

- Once the correct period is selected, the Funding Mechanism field will appear
- Select the Funding Mechanism from the drop-down list for which you would like to upload expenditure data
- If you do not see your mechanism on the drop-down list, please submit a request via DATIM Support www.datim.zendesk.com
- If you do not know which mechanism to report against, please contact your Agency POC

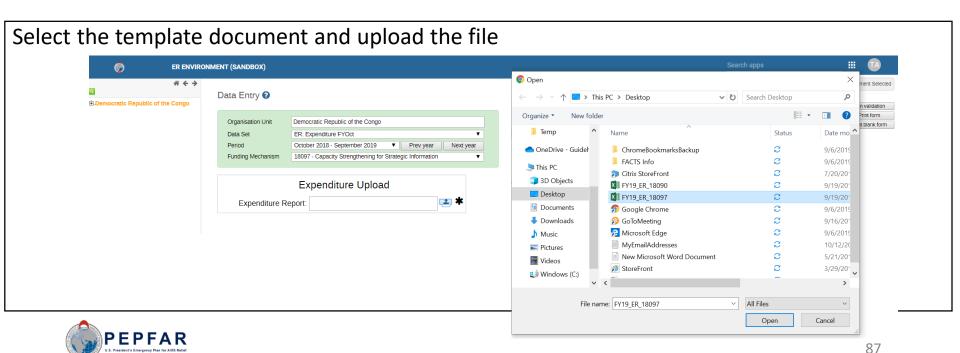




Selecting Template File to Upload

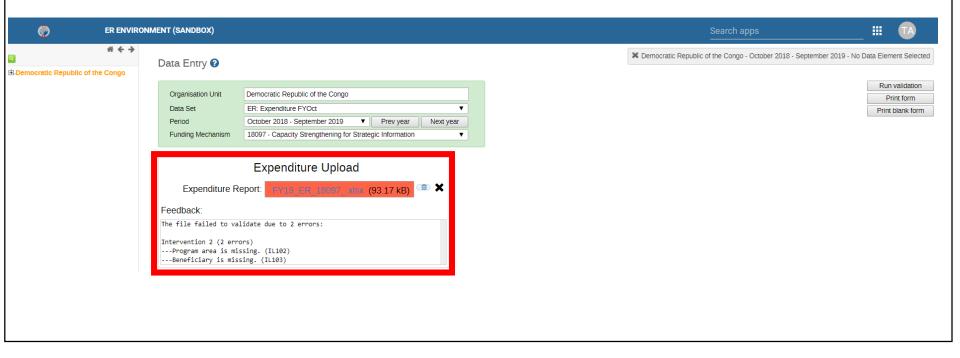
Click the upload icon on the right side of the Expenditure Report field





Invalid File

- If the template is invalid, the Expenditure Report field will be flagged red and an "x" will appear to the right of the Expenditure Report field
- The feedback box will alert you to the error(s) that caused the upload to fail DATIM's validation check
- Invalid files must be deleted, corrected, and re-uploaded



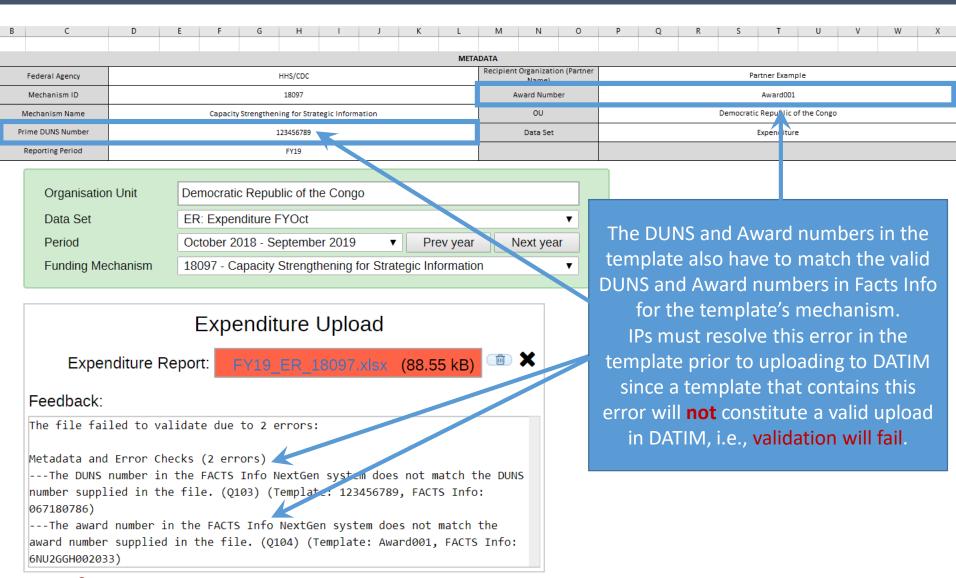


Overview of DATIM Validation Checks

- Some of the checks that will result in an invalid template in DATIM have been highlighted in the expenditure template section
- This section will provide an exhaustive list of the errors that will cause an unsuccessful upload of a valid template in DATIM, i.e., validation will fail
 - IPs should **not** submit templates which have not been validated in DATIM
 - Error messages should be resolved by editing the template
 - Once a new template is uploaded the DATIM will re-run validation checks
 - Submission should only occur once DATIM indicates "The file was validated"

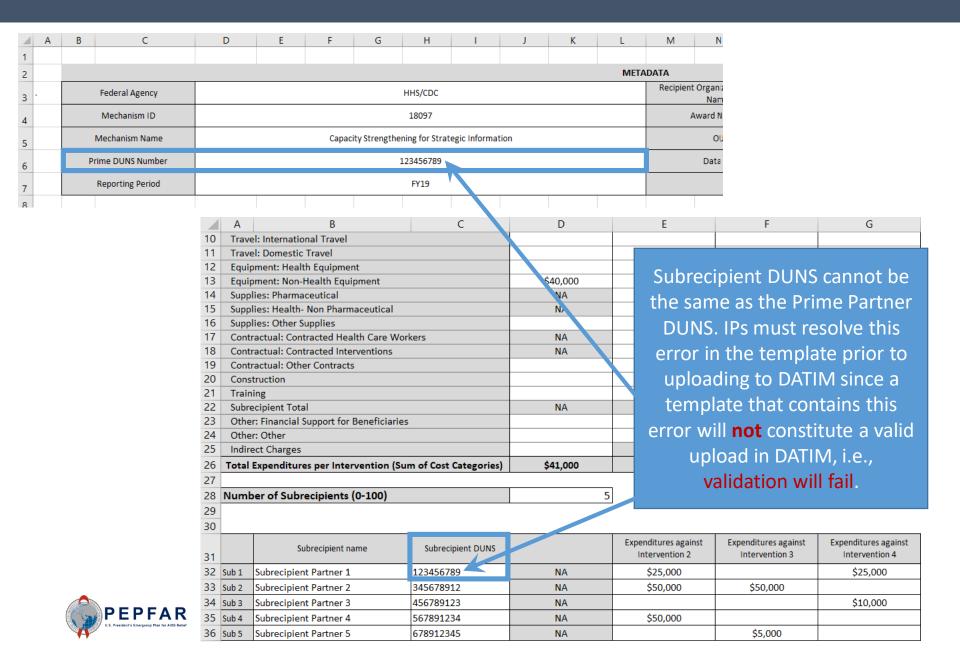


DUNS or Award Number Does Not Match FACTS Info





Subrecipient DUNS Matches Prime DUNS



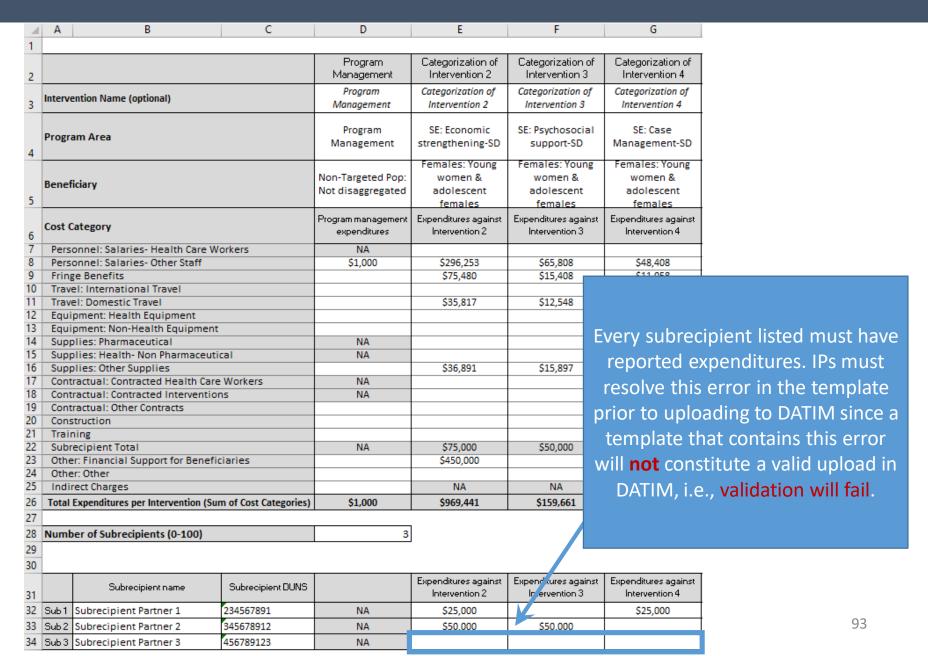
Program Area or Beneficiary Missing

4	A B C	D		E	F		G	Н	1
1									
2		Program Management		Categorization of Intervention 2	Categorizat Interventio		Categorization of Intervention 4	Categorization of Intervention 5	Categorization of Intervention 6
3	Intervention Name (optional)	Program Management	ı	ategorization of Intervention 2	Categorizat Interventi		Categorization of Intervention 4	Categorization of Intervention 5	Categorization of Intervention 6
4	Program Area	Program Management	s	SE: Economic trengthening-SD	SE: Psychosocial support-SD		A	SE: Legal, human rights & protection- SD	A
5	Beneficiary	Non-Targeted Pop: Not disaggregated	/	<u>↑</u>	Females: \ women adolescent f	&	Females: Young women & adolescent females	Males: Young man & adolescent hales	A
6	Cost Category	Program management expenditures	E	penditures against Intervention 2	Expenditures Interven	_	Expenditures against Intervention 4	Expenditures against Intervention 5	Expenditures against Intervention 6
7	Personnel: Salaries-Health Care Workers	NA							
8	Personnel: Salaries- Other Staff	\$1,000		\$296,253	\$ 65,80		\$48,408	\$43,883	\$29,372
9	Fringe Benefits			\$75,480	\$15,40	8	\$11,058	\$2,454	/
10	Travel: International Travel								
11	Travel: Domestic Travel					В	\$5,480	\$12,930	
12	Equipment: Health Equipment	The prog	or:	am area ar	Н				
13	Equipment: Non-Health Equipment								
14	Supplies: Pharmaceutical	beneficiary m	าน	st be selec	ted for				
15 16	Supplies: Health-Non Pharmaceutical						43.450	******	
17	Supplies: Other Supplies Contractual: Contracted Health Care Workers	any interv	er	ntion that I	าลร		\$3,450	\$23,543	
18	Contractual: Contracted Health Care Workers Contractual: Contracted Interventions	expenditure	c	IDs must re	evlos		\$40,000		
19	Contractual: Other Contracts						\$40,000		
20	Construction	this error in	th	e template	prior				
21	Training	-					\$154.805		
	Subrecipient Total	to uploading	ξ τ	O DATIIVI SI	nce a	0	\$35,000	\$0	\$0
22 23 24	Other: Financial Support for Beneficiaries	template that	٠ ر	ontains thi	s error		\$35,000		
24	Other: Other	· ·							
25	Indirect Charges	will not constitute a valid			alid	0	NA	NA	NA
26	Total Expenditures per Intervention (Sum of Cost Categor					1	\$298,201	\$82,810	\$29,372
		upload in DATIM, i.e., validation							

will fail.



Subrecipient Expenditures Missing



Subrecipient Details Missing

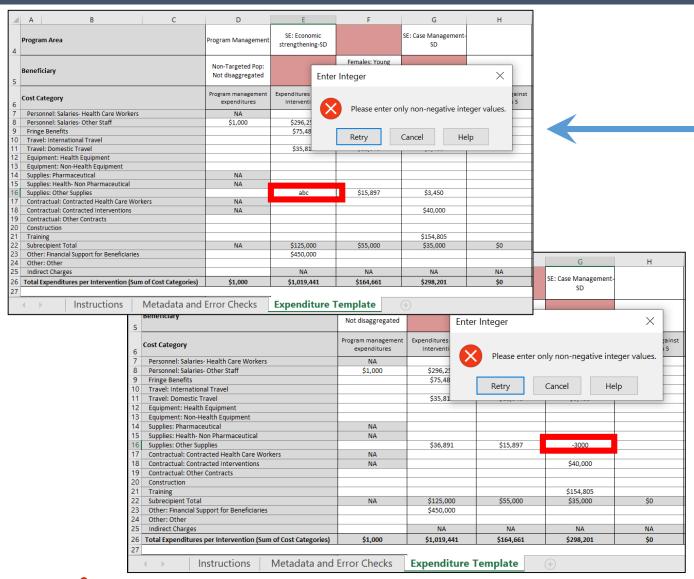
\square	Α	В	С	D		E	F	G					
9	Fring	ge Benefits				\$75,480	\$15,408	\$11,058					
10	Trav	el: International Travel											
11	Trav	el: Domestic Travel				\$35,817	\$12,548	\$5,480					
12	Equi	pment: Health Equipment											
13	Equi	pment: Non-Health Equipment											
14		lies: Pharmaceutical		NA									
15		lies: Health- Non Pharmaceutical		NA									
16		lies: Other Supplies				Every subrecipient listed with							
17	Cont	ractual: Contracted Health Care Wo	orkers	NA		reporte	ed expenditure	s must					
18		ractual: Contracted Interventions		NA									
19		ractual: Other Contracts				have a s	ubrecipient na	me and					
20		truction				assigne	ed DUNS numb	ner IPs					
21	Trair							· ·					
22		ecipient Total		NA		must resolve this error in the							
23		r: Financial Support for Beneficiari	es			template prior to uploading to							
24		r: Other											
25		rect Charges				DATIM	since a templa	te that					
26	Total	Expenditures per Intervention (Sur	n of Cost Categories)	\$1,000	1/	contai	ill not						
27													
28	Numb	per of Subrecipients (0-100)		5			ute a valid upl						
29						DATIM,	i.e., validation	will fail.					
30													
					Exper	iditures against	Expenditures against	Expenditures against					
31		Subrecipient name	Subrecipient DUNS		In	tervention 2	Intervention 3	Intervention 4					
32	Sub 1	Subrecipient Partner 1		NA		\$25,000		\$25,000					
33	Sub 2		345678912	NA		\$50,000	\$50,000	-					
34	Sub 3 Subrecipient Partner 3 456789123			NA				\$10,000					
35	5 Sub 4			NA	\$50,000								
36	Sub 5	Subrecipient Partner 5	000000000	NA	\$5,000								



Subrecipient Data Outside Designated Rows

	Α	В	С	D	E	F	G		
1									
2				Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4		
3	Interv	rention Name (optional)		Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4		
4	Progr	ram Area		Program Management	SE: Economic strengthening-SD	SE: Psychosocial support-SD	SE: Case Management-SD		
5	Bene	ficiary		Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent females	Females: Young women & adolescent females	Females: Young women & adolescent females		
6	Cost	Category		Program management expenditures	Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4		
7	Pers	sonnel: Salaries- Health Care W	orkers	NA					
8		sonnel: Salaries- Other Staff		\$1,000	\$296,253	\$65,808			
9		ge Benefits			\$75,480	\$15,408	All cubracia	iont data must bo	
10		vel: International Travel			405.017		All subrecip	ient data must be	
11		vel: Domestic Travel			\$35,817	\$12,548	entered with	nin the designated	
13		ipment: Health Equipment ipment: Non-Health Equipment							
14	_	plies: Pharmaceutical		NA			subrecipier	nt rows. IPs must	
15		plies: Health- Non Pharmaceutic	cal	NA NA					
16		plies: Other Supplies		147	\$36,891	\$15,897	resolve t	his error in the	
17		tractual: Contracted Health Care	Workers	NA	. ,			and the state of the state of	
18	Con	tractual: Contracted Intervention	ns	NA		U	empiate pri	or to uploading to	
19	Con	tractual: Other Contracts					DATIM since	o a tamplata that	
20		struction					DATIIVI SIIIC	e a template that	
21		ning			*		contains th	nis error will not	
22		recipient Total		NA	\$150,000	\$50,00			
24		er: Financial Support for Benefic er: Other	laries		\$450,000		constitute	a valid upload in	
25		irect Charges			NA	/JA			
26	_	Expenditures per Intervention (Sur	n of Cost Categories)	\$1,000	\$1 44,441	\$1,59,661	JAHM, i.e.,	validation will fail.	
27					1				
28	Num	ber of Subrecipients (0-100)		2		_			-
29 30					'				
31		Subrecipient name	Subrecipient DUNS		Expenditures against Intervention 2	Expenditures against Intervention 3	Expenditures against Intervention 4		
32	Sub 1	Subrecipient Partner 1	234567891	NA	\$25,000		\$25,000		
33	Sub 2	Subrecipient Partner 2	345678912	NA	\$50,000	\$50,000			95
34		Subrecipient Partner 3	456789123		\$75,000	-	\$10,000	•	-

Negative and Non-Numeric Entries



Negative numbers or nonnumeric entries for expenditures are invalid. IPs must resolve this error in the template prior to uploading to DATIM since a template that contains this error will **not** constitute a valid upload in DATIM, i.e., validation will fail.



"NA" Overwritten

	٨	P	B C D E F G H I								1
4	A	D	C	U	E		r	G	П		
1											
2				Program Management	Categorization of Intervention 2		gorization of ervention 3	Categorization of Intervention 4	Categorization of Intervention 5		gorization of ervention 6
_				Program	Categorization of	Ca					brization of
3	Interven	ntion Name (optional)		Management	Intervention 2		Note th	at cama a cast	anto anvior v	:11	vention 6
_				wanagement	Intervention 2	-	note th	at some cost	categories v	VIII	vention o
	n			Program	SE: Economic	SE	have an	"NA" prepor	nulated This	c ic	ducation
	Program	n Area		Management	strengthening-SD						stance-SD
4				_			becai	use these cos	st categories		
				Non Tourney Dogs	Females: Young			rity Pops:			
	Benefici	iary		Non-Targeted Pop: Not disaggregated	women &		cannot	be found und	der this type	OT	bile Pops
5				Not disaggregated	adolescent females	intervention. If any "NA" v					olle Pops
				Program management	Expenditures against	Ex	interve	endon. Il arry	INA Value	15	itures against
6	Cost Cat	tegory		expenditures	Intervention 2	La	overwri	tten, it creat	es an error. I	Ps	rvention 6
7	D	nnel: Salaries- Health Care Wor	d	NA.							
8		onnel: Salaries- Health Care Wor onnel: Salaries- Other Staff	kers	\$1,000	\$296,253		must	t resolve this	error in the		29.372
9				\$1,000	\$75,480		tomn	lata prior to	unloading to		11,323
10		Benefits I: International Travel			\$75,460		temp	late prior to	upidading to		11,525
11		I: Domestic Travel			\$35,817		DATI	IM since a te	mnlate that		23,232
12		ment: Health Equipment			\$35,017						25,252
13		ment: Non-Health Equipment					con	tains this err	or will not		
14		ies: Pharmaceutical		\$40,000							
15		ies: Health-Non Pharmaceutica	.1	NA			constitu	ıte a valid up	ioad in DAII	IVI,	
16		ies: Other Supplies	11	INA	\$36,891		;	e., validation	will fail		2,342
17		actual: Contracted Health Care	Workers	NA.	230,031		1.	c., valluation	wiii idii		2,372
18		actual: Contracted Intervention		NA NA				\$40,000			45,643
19		actual: Other Contracts	-	III/A			_	\$10,000			7.3,043
20		truction									
21	Traini							\$154,805			43.945
22		cipient Total		NA NA	\$125,000		555 000	\$35,000	\$0		\$0
23		: Financial Support for Beneficia	ries	107	\$450,000	•		\$22,000			
24		: Other			4 .20,000		V				
25		ect Charges			NA		50,000	NA	NA		NA
26		penditures per Intervention (Su	\$1,000	\$1,019,441		164,661	\$298,201	\$82,810	ç	155.857	
27	. Ottai Ex	penantares per intervention jour	in or cost categories)	92,000	V1/013/441	ų,	20-7,002	QEJOJE01	402/010	Ų	200,001



File Has Additional Tab

⊿	A B C	D	E	F	G	Н		T T
1								
2		Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorizatio Interventio		Categorization of Intervention 6
3	Intervention Name (optional)	Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorizati Interventio	•	Categorization of Intervention 6
4	Program Area	Program Management	SE: Economic strengthening-SD	SE: Psychosocial support-SD	SE: Case Management-SD	SE: Legal, hu rights & prote SD		SE: Education assistance-SD
5	Reneticiary	Non-Targeted Pop: Not disaggregated	Females: Young women & adolescent femal		to the file c must resolv		men & nales	Priority Pops: Mobile Pops
6	Cost Category	Program management expenditures	Expenditures again Intervention 2		template pi		gainst n 5	Expenditures against Intervention 6
7	Personnel: Salaries- Health Care Workers	NA			to DATIM sin			
8	Personnel: Salaries- Other Staff	\$1,000	\$296,253	upioaumg	to DATIIVI SII	ice a		\$29,372
9	Fringe Benefits		\$75,480	template t		\$11,323		
10	Travel: International Travel							
11	Travel: Domestic Travel		\$35,817	error will no		\$23,232		
12	Equipment: Health Equipment							
13	Equipment: Non-Health Equipment			upload	in DATIM, i.e	e.,		
14	Supplies: Pharmaceutical	\$40,000		valida	tion will fail			
15	Supplies: Health- Non Pharmaceutical	NA		Vallua	tion will lail			
16	Supplies: Other Supplies		\$36,891					\$2,342
17	Contractual: Contracted Health Care Workers	NA						
18	Contractual: Contracted Interventions	NA			\$40,000			\$45,643
19	Contractual: Other Contracts							
20	Construction					<u> </u>		
21	Training				\$154,805			\$43,945
22	Subrecipient Total	NA	\$125,00 J	\$55,000	\$35,000	\$0		\$0
23	Other: Financial Support for Beneficiaries		\$450,7 00			<u> </u>		
24	Other: Other							
25	Indirect Charges		,A	\$50,000	NA	NA		NA
26	Total Expenditures per Intervention (Sum of Cost Categories)	\$1,000	\$1/19,441	\$164,661	\$298,201	\$82,810	0	\$155,857
27	·							
	Number of Subrecipients (0-100)	5						
20	Instructions Metadata and Error Checks Expenditu	ture Template DataTr	ranferTab +					: [1]

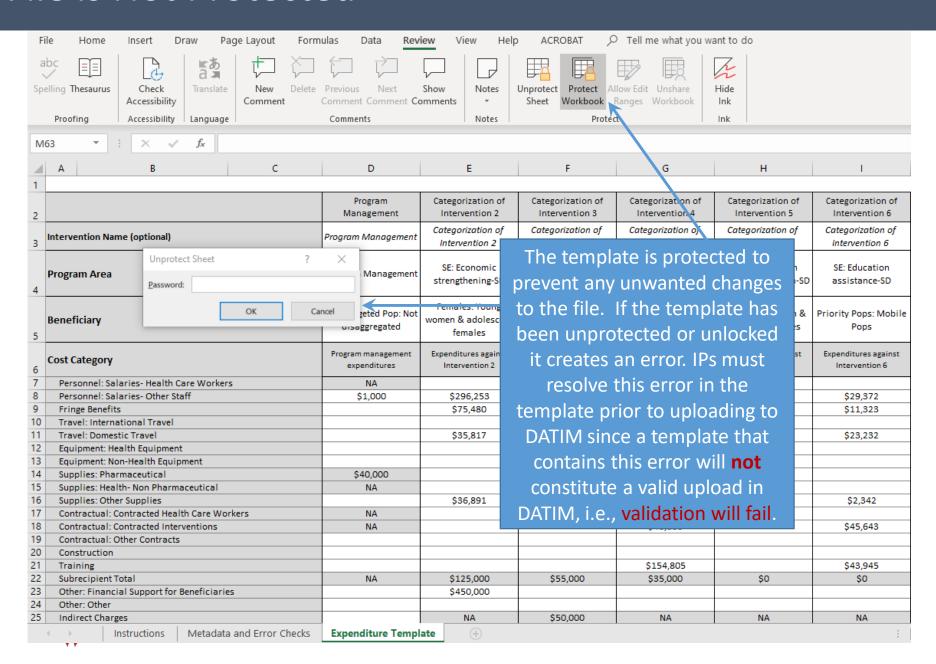


File is Missing Required Tab

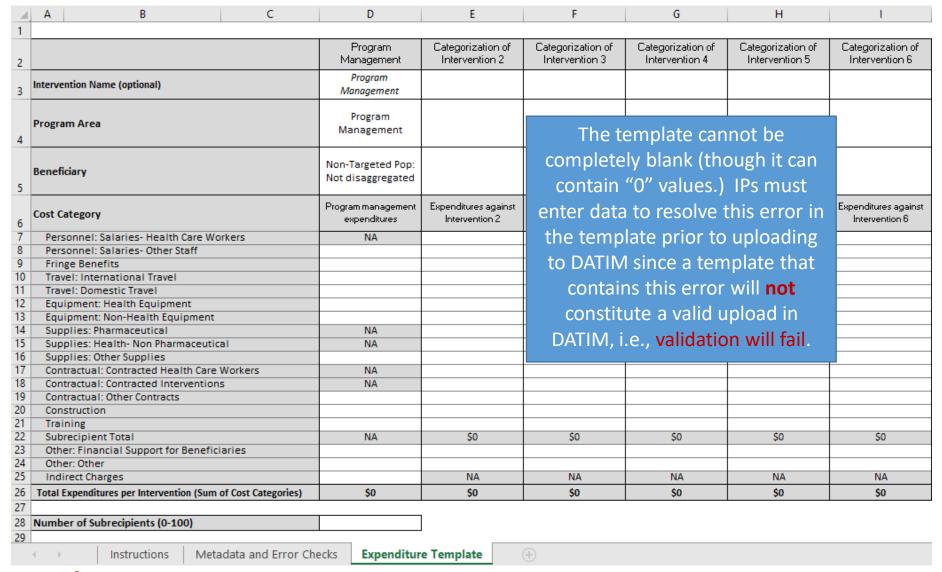
4	A B	С	D	E	F	G	Н	T	
1									
2			Program Management	Categorization of Intervention 2	Categorization of Intervention 3	Categorization of Intervention 4	Categorization of Intervention 5	Categorization of Intervention 6	
	ntervention Name (optional)		Program	Categorization of	Categorization of	Categorization of	Categorization of	Categorization of	
3	intervention name (optional)		Management	Intervention 2	Intervention 3	Intervention 4	Intervention 5	Intervention 6	
4	Program Area		s cannot dele		SE: Psychosocial support-SD	SE: Case Management-SD	SE: Legal, human rights & protection- SD	SE: Education assistance-SD	
5	Beneficiary	and Error C	e, as the Me hecks tab ha	s been	Females: Young women & adolescent females	Females: Young women & adolescent females	Males: Young men & adolescent males	Priority Pops: Mobile Pops	
6	Cost Category	in the templ	ist resolve th ate, or restar	IIISC	Expenditures against Intervention 3	Expenditures against Intervention 4	Expenditures against Intervention 5	Expenditures against Intervention 6	
7	Personnel: Salaries- Health Care V								
8	Personnel: Salaries- Other Staff	tempiate, p	rior to uploa	aing to	\$65,808	\$48,408	\$43,883	\$29,372	
9	Fringe Benefits	DATIM sin	ce a templat	e that	\$15,408	\$11,058	\$2,454	\$11,323	
10	Travel: International Travel								
11	Travel: Domestic Travel	contains t	this error wil	not	\$12,548	\$5,480	\$12,930	\$23,232	
12	Equipment: Health Equipment								
13	Equipment: Non-Health Equipmen	constitute	e a valid uplo	ad in					
14	Supplies: Pharmaceutical	DATINA : a	volidation v	.:II £0:I					
15	Supplies: Health-Non Pharmaceu	DATIIVI, I.e.,	, validation w	/III IaII.					
16	Supplies: Other Supplies			\$36,891	\$15,897	\$3,450	\$23,543	\$2,342	
17	Contractual: Contracted Health Ca		NA						
18	Contractual: Contracted Intervent	ons	NA			\$40,000		\$45,643	
19	Contractual: Other Contracts								
20	Construction					****		***	
21	Training			4	4	\$154,805		\$43,945	
22	Subrecipient Total		NA	\$125,000	\$55,000	\$35,000	\$0	\$0	
23	Other: Financial Support for eneficiaries			\$450,000					
24 25	Other: Other			MA	¢50,000	MA	MA	MA	
	Indirect Charges	** ***	NA	\$50,000	NA .	NA	NA		
26	Total Expenditures per Intervention	\$1,000	\$1,019,441	\$164,661	\$298,201	\$82,810	\$155,857		
27	N - 1 - 10 1 - 11 - 12 12 12 12 12 12 12 12 12 12 12 12 12		_						
	Number of Subrecipient (0-100)		5						

99

File is Not Protected

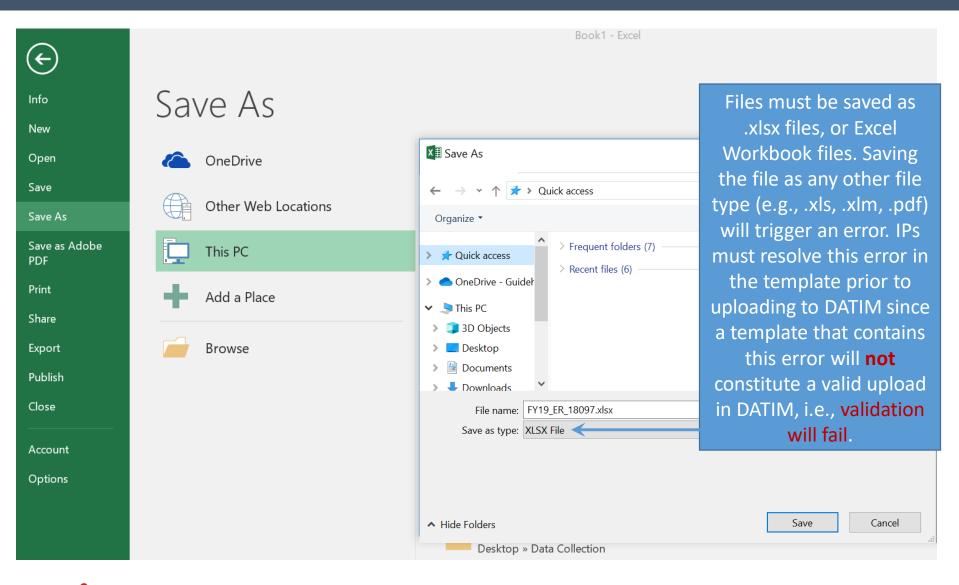


File Contains No Valid Data; Blank File





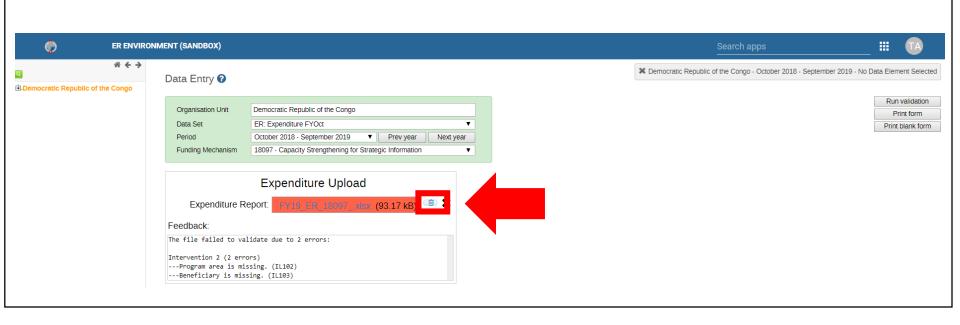
File Must Have the .xlsx Extension





Deleting an Invalid File (1)

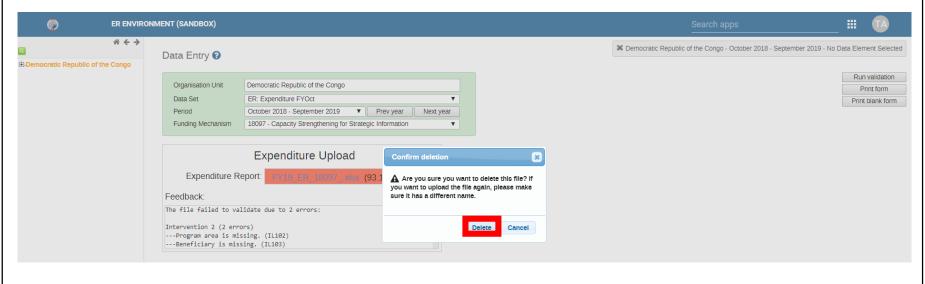
To delete the invalid file, select the trash icon on the right side of the Expenditure Report field



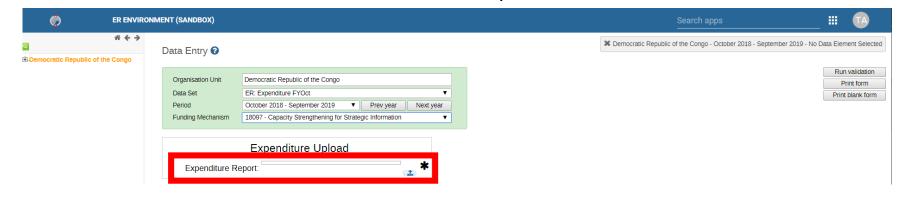


Deleting an Invalid File (2)

Once you have selected the trash icon, select "Delete" in the confirmation pop-up.



The file will now be cleared and a new file can be uploaded



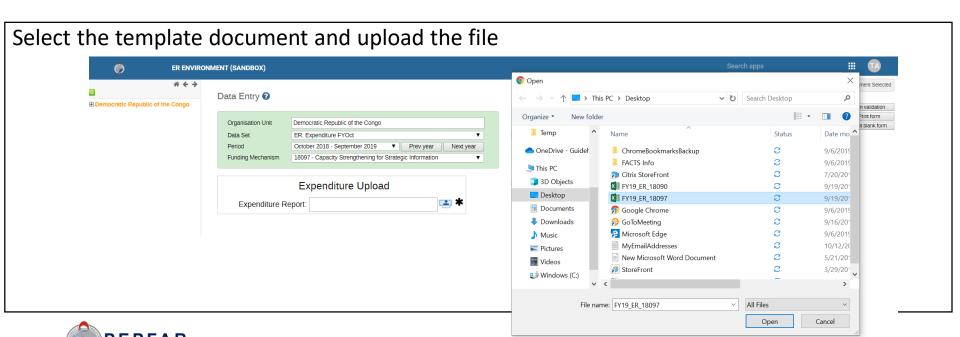


Note: To use the same file name when re-uploading a template, simply delete the existing file and refresh the page before uploading a new template.

Select (Revised) Template File to Upload

Click the Upload icon on the right side of the Expenditure Report field

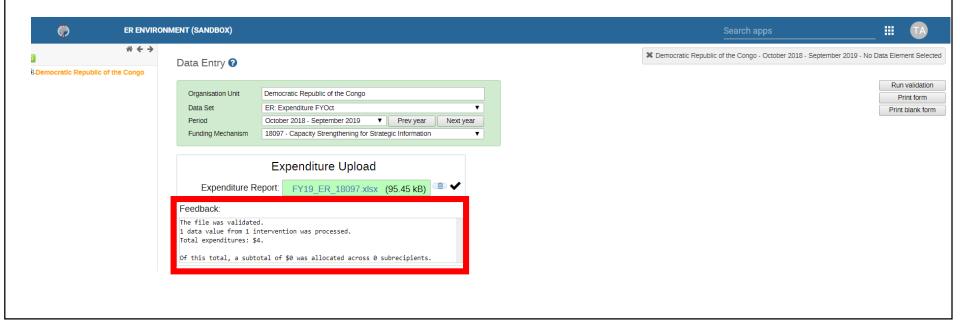




60

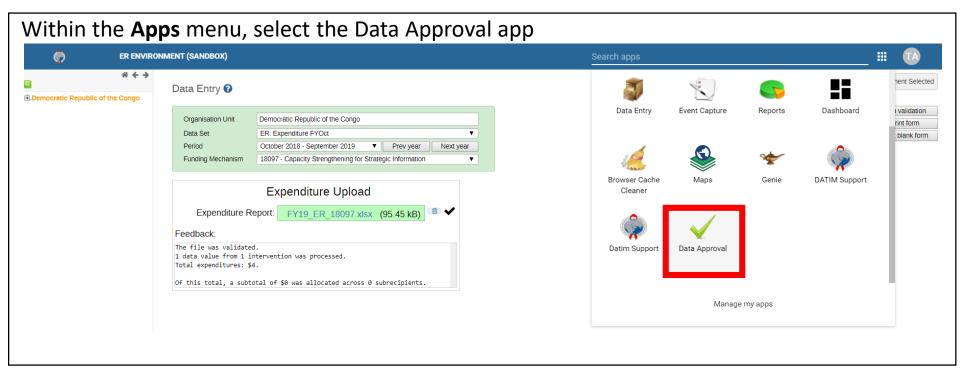
Valid File

- The Expenditure Report cell will turn green once DATIM has validated the file uploaded
- A check mark will also appear next to the Expenditure Report field to indicate that the file is valid
- In the feedback field, the number of interventions and total expenditures reported will be indicated for the user to check against
- The file is now ready to submit!





DATIM Submission: Navigate to Data Approval App



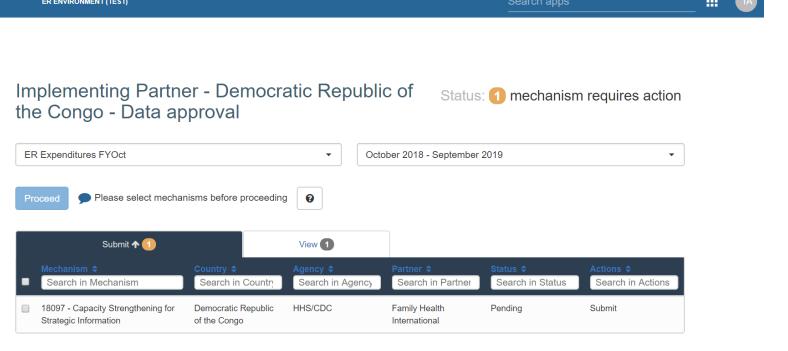


Data Approval Page

After selecting the data approvals app, you will see this page:

© Search apps

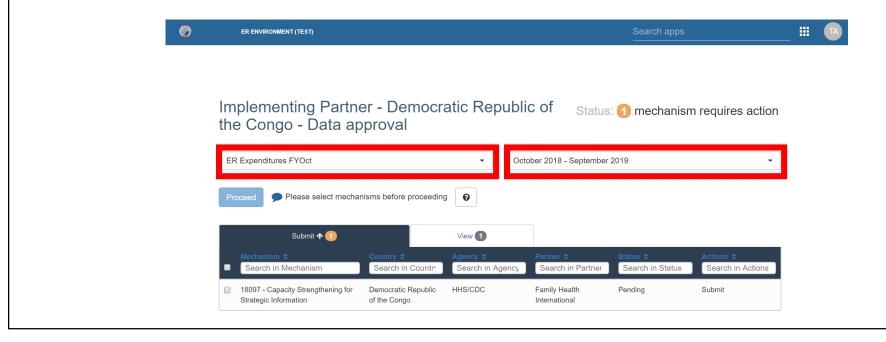
Search apps





Verify Data Set and Period

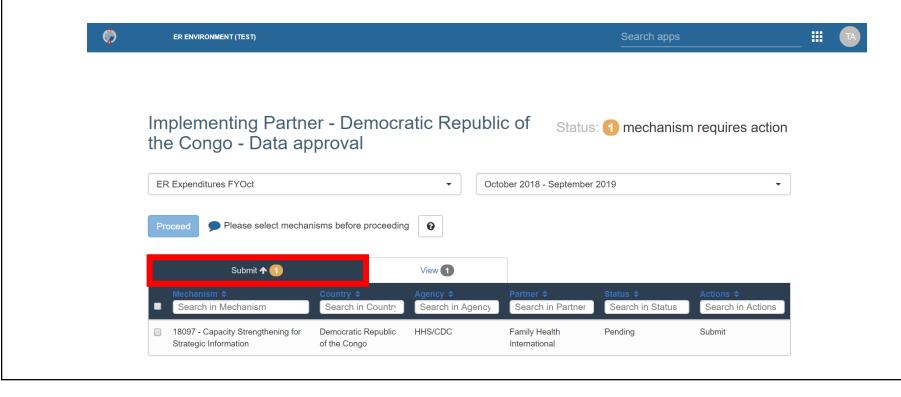
- Begin by ensuring that the correct data set and periods are selected from the drop-down lists
- For dataset group, the selection should be "ER Expenditures FYOct"
- For the period, the selection should be "October 2018-September 2019"





Click the Submit Tab

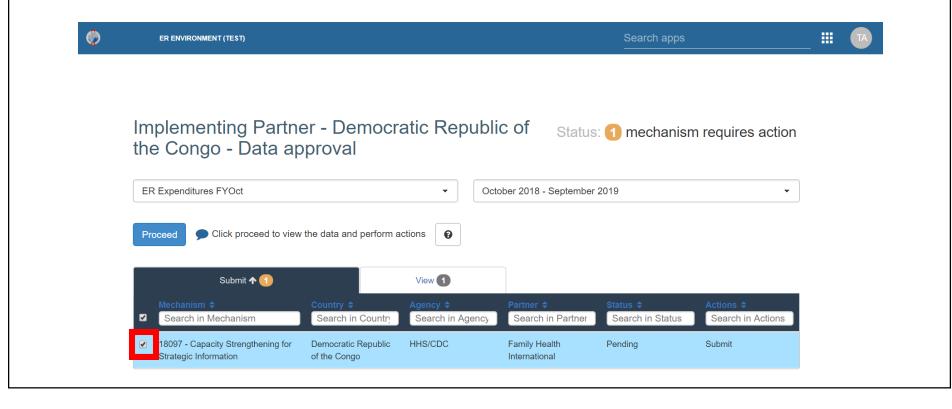
Click the Submit tab to see the funding mechanisms for which you have the option to submit expenditure data





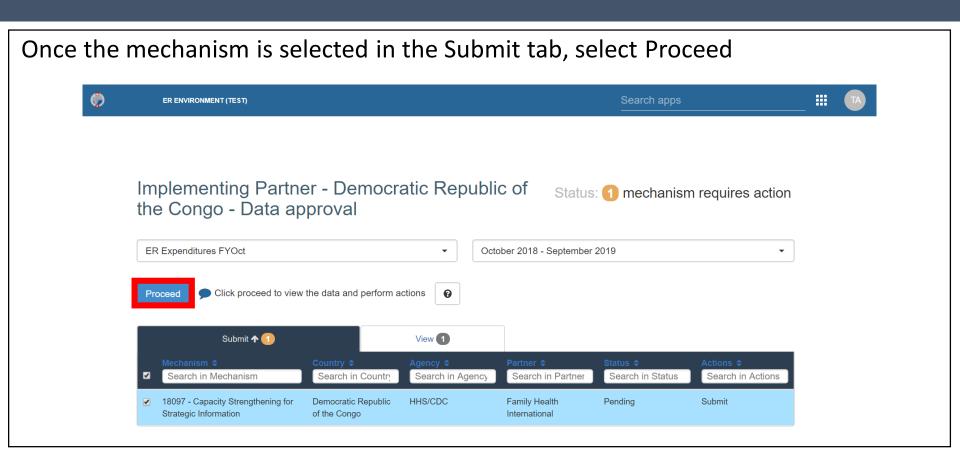
Select Mechanism to Submit

Select the Funding Mechanism for which you would like to submit the COP18/FY19 expenditure reporting template by checking the box directly to the left of the mechanism





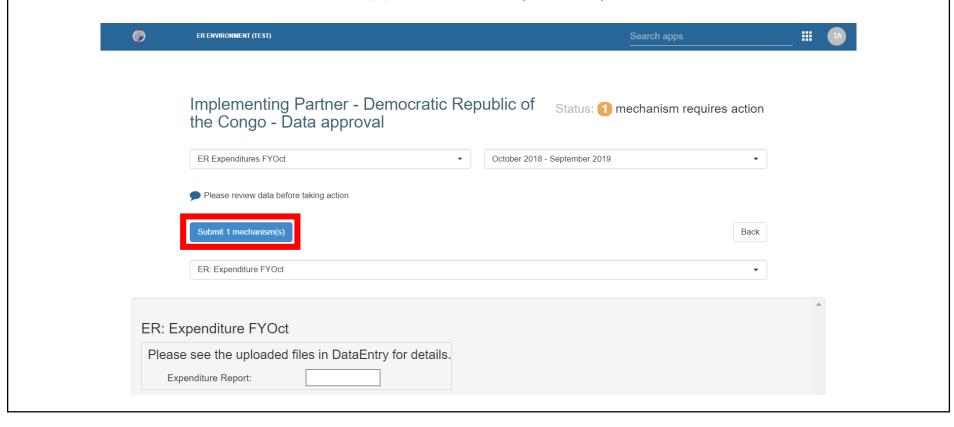
Select Proceed





Select Submit 1 Mechanism(s)

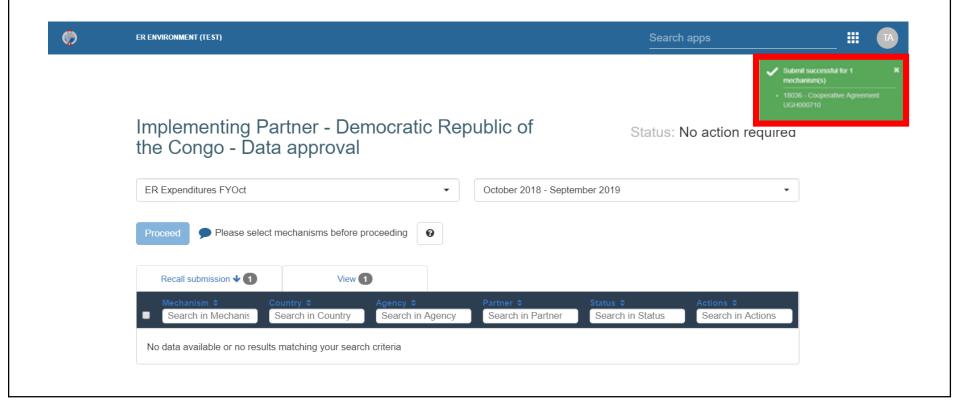
- After selecting Proceed, you will proceed to the approvals page
- Select "Submit 1 mechanism(s)" to submit your expenditure data





Verify Submission Successful

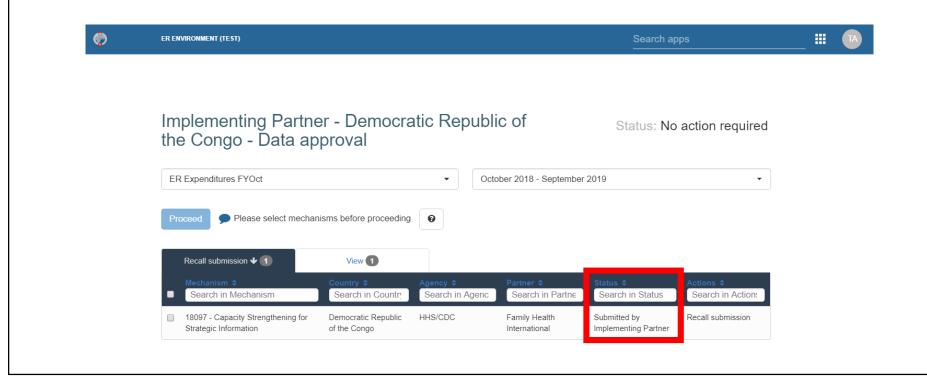
- Verify that the submission was successful
- If the submission was successful, a green message box will appear in the top right corner of the page





View Submitted Mechanisms

- Click the View tab to see the status of implementing mechanisms for which you are responsible for reporting COP18/FY19 expenditures
- You can see the status of each mechanism here





Reviewer Checks: Overview

- Once the FY19 ER Template has been successfully uploaded to DATIM and submitted by the IP, it will be reviewed by the Agency AOR/COR/Project Officer (Agency reviewer)
- The Agency reviewer will check for:
 - Errors or blanks in the metadata, such as incorrect Award number
 - Program management expenditure not entered when expected including indirect costs if applicable
 - Interventions not aligned to COP strategy or IP work plans
 - Expenditures that do not seem to be aligned to the intervention definition
 - Expenditures that are less than or in excess of expectations
- If the reviewer notes any of the above or other potential errors, he/she may contact the IP for further explanation or to require or suggest revisions prior to approving the ER template. In this case the IP may be asked to upload a revised template.



DATIM References and Help



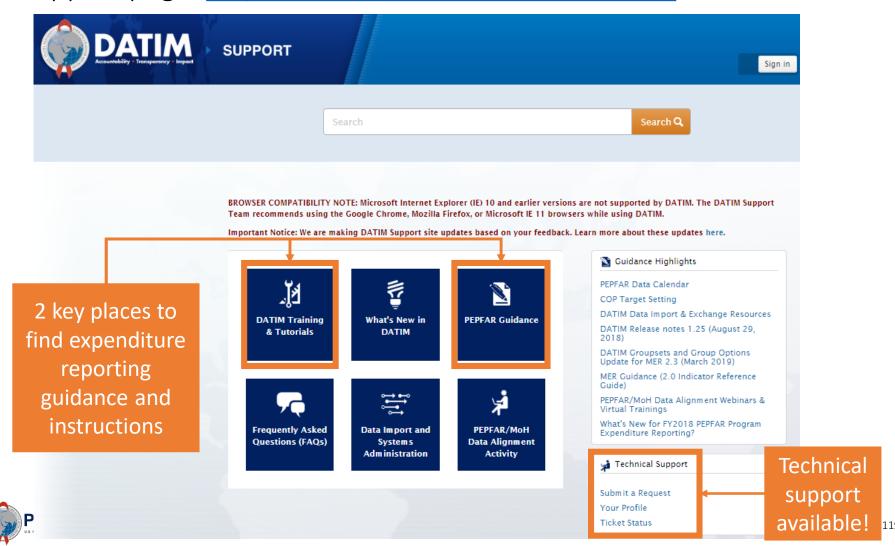
Expenditure Reporting in DATIM: Essentials

- Expenditure Reporting will take place in DATIM
- Data will be captured in a <u>generic</u>, <u>standardized</u> Excel template, uploaded to DATIM
 - FY19 expenditure reporting is at the OU level, not disaggregated by benefitting country or sub national unit (SNU)
 - IPs will upload and submit template file through DATIM
 - Subrecipient expenditures (if applicable) should be included on the prime implementing partner's template
- USG Staff will be involved in workflow and approval of data
- Timeline will be the same as MER Q4 open and closure periods
 - See <u>FY19 PEPFAR DATA Calendar</u>

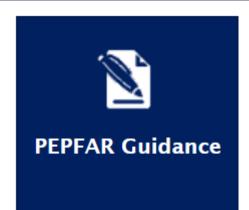


Guidance and Instructions

References, guidance, and instructions can be found on the DATIM support page, https://datim.zendesk.com/hc/en-us



What guidance and instructions are available?



- What's New for FY2019 PEPFAR Program Expenditure Reporting?
- Expenditure Reporting Excel Template
- Checklist for Reviewing Expenditure Reporting Data
- Monitoring PEPFAR Program Expenditures
- Agency Points of Contact for Expenditure Reporting
- PEPFAR Financial Classifications Reference Guide



- FY19 Instructions for IP Users Filling out the ER Template, DATIM Submission, and Error Resolution
- PEPFAR ER Data Review and Approval Instructions- Agency Field Reviewer
- Instructions for User Administrators: Creating new ER user accounts
- User Administration: Supplemental Guidance for ER

