Annual Expenditure Analysis- Data Input Instructions

Please complete this Excel template and submit it according to the instructions below.

A manual has been provided to assist with this data request. Please review the template and manual now and cont Activity Manager (AM)/Program Officer (PO)/Agreement/Contracting Officer's Technical Representative (A/COTR) was questions.

To ensure uniqueness of file names, please use the following conventions when saving your completed templates:

<OU>_<Agreement ID>_ EP_<Partner Name>_<Reporting Cycle>_<Seq>.xlsx

Where:

<OU> = Two letter international Country code (e.g., VN for Vietnam, TZ for Tanzania, etc.) or Operating Unit (OU)

<Agreement_ID> = Mechanism Agreement number; the <Agreement ID> is available from the table on the Resul
page in PROMIS

E = E for an Expenditure Analysis Template

P = P for template to be attributed to Prime Partner

<Partner_Name> = Name of the organization associated with template results; enter Prime Partner name

<Reporting Cycle> = 'yyyy Expenditures' where yyyy is corresponding Fiscal Year (e.g., 2012 Expenditures)

<Seq> = should consist of two numeric digits as follows:

1st Digit = template number; 1 for 1st template, 2 for 2nd template (if more than one template of this type ne and so on up to 9

2nd Digit = template update number; 1 for initial submission; 2 for the next <u>update</u> (if any), and so on up to 9 For example, Seq = '34' means the 4th submission of the 3rd template uploaded (3rd in the original sequence)

Note: if a given template fails to upload successfully, its name should be reused in a subsequent upload try aft correction

.xlsx = must be saved as a .xlsx Excel file (not .xls)

Example expenditure analysis (E) template file name:

VN_9740_EP_Columbia University_2012 Expenditures_11.xlsx

Submit the completed template via the PROMIS web-based application and alert your AM/PO/A/COTR of each draft submission. Respective USG Agency staff (USAID, CDC, DOD, Peace Corps, State) will receive the data from the PRO application.

Complete the **Partner Info** page. Be sure to include your organization's contact information. Verify that your inputs required information in your submission. Implementing organizations, defined as having a direct financial agreeme USG Agency, are responsible for collating and submitting all sub-partner data.

For each row on the **Program Information-...** and **Expenditures-...** information entry tabs, use the drop downs to segographical area (sub-national unit, national or above-national) pertaining to each entry row and associated values in the program area fields for that row of data following the guidance provided (see **manual**). Each row can have enone or more of the listed program information columns. **Do not** use more than one row to enter program information each sub-national unit set. Enter results in the correct program information column for that row. Each row with results specify the sub-national unit in the row in which the results appear. Your trainer will provide additional guidant how to apply the categories listed on the form.

The Expenditure Analysis reporting period is 12 months (01 October to 30 September). This period is regardless of your organization receives PEPFAR funding.

Please make note of your general comments regarding this mechanism on the **Partner Info** tab. Please make note calculations and comments for the appropriate Program Area heading in the **Program Information - Comments** and **Expenditures - Comments** tabs.

On each **Comments** tab, please explain the following using the comments fields:

- o Explain methods for allocation that differ from the recommended methods in the Expenditure Analysis Manual
- o Explain any expenditure values reported less than 10 USD

In general, more information is better.

Prior to submission, please confirm that each of the data quality issues identified on the **Data Quality Checks** tab ar resolved.

All USG partners are entitled to report their achievements regardless of overlap with another partner. The informar provide will help the USG team report more accurate aggregate data.

For the detailed definitions of program and expenditure categories, please refer to the manual provided on the PRC website.

To help with navigation on the different information entry tabs, notice the Quick Links bar on the left-hand column. any of the blue hyperlinks to quickly navigate to that entry sub-section. Additionally, on each information entry tab, hyperlinks to the respective comments field above each entry area. Click a hyperlink to quickly move to the proper cell to enter comments for the Program information area; each link reads "Add Comment". Clicking the correspond next to each comment field will return you to the previous Program Information or Expenditure column.

* NOTE: DO NOT ADD COLUMNS OR ROWS TO THE WORKSHEETS

DS-4213 President's Emergency Plan for AIDS Relief (PEPFAR) Program Expenditures

Please read Agency Disclosure Notice and Instructions prior to completing this form

This data collection is mandatory under the authority of the Tom Lantos and Henry J. Hyde United States Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization Act of 2008 (P.L. 110-293) (HIV/AIDS Leadership Act). 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, SA-29, 2nd Floor, Washington, DC 20522-2920

OMB No. 1405-xxxx OMB approval expires xx/xx/xxxx Average Burden-24 hours

Personal Information for PEPFAR Expenditure Analysis Data Collection

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- o User name this information is used to ensure a user is uniquely identified within PROMIS.
- o User organization this information is used to limit access to only those elements of PROMIS data relevant to your organiza o User email address this information is maintained to support user notifications such as a notice for a required password cheems of use, etc.
- o User roles & privileges this information is used to further limit access to only those PROMIS functional capabilities and elerelevant to your role within your organization.
- o Each user log-on session to include log-in time and log-out time this information is used to assess the appropriateness of y site.
- o Each PROMIS data element entered, updated, or deleted by you in the course of your interactions with PROMIS this information data change history, to assess inappropriate PROMIS data changes, and to provide a means to identify data that may need to The PROMIS hosting services provider also tracks information to support site performance to include:
- o The browser used when accessing PROMIS.
- o The time and date of each visit to the PROMIS log-in page.
- o The PROMIS web pages visited.
- o The address of the web site visited immediately prior to visiting the PROMIS web site.
- o Any malicious actions against the PROMIS web service.

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• The PROMIS website maintains both session-based and persistent "cookies" on your browser. PROMIS session-based cookies temporarily in your computer's random access memory (RAM) while you are using PROMIS. When you close your web browser PROMIS persistent cookies store information for a longer period and are used to identify returning PROMIS users.

HIPAA Privacy Rule Notice

- The PROMIS web site does not collect or maintain individually identifiable Protected Health Information (PHI). While PEPFAI such information from their health service provider Sub-Partners in-Country, PROMIS provides for entry of only aggregated relations.
- PROMIS maintains no individual identifiers that may be linked to a specific individual or patient.
- The PROMIS web site maintains only aggregate statistical data. In addition to population counts versus Indicator, PROMIS or certain Indicators by gender (i.e., male or female) and/or age group (e.g., <1 year, 1-5 years, etc.). Hence the PROMIS databas under the HIPAA Privacy Rule.

Partner Information

Annual Expenditure Analysis

Partner Background (Complete the areas in light gra	y below)
Partner Organization Name & Agreement ID:	<e.g., abc="" associates:="" health="" syst<="" td=""></e.g.,>
Director/Chief of Party:	
Telephone:	
Cell:	
E-mail:	
SI Focal Person (if applicable):	
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Cell:	
E-mail:	
Financial Focal Person (if applicable):	
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Cell:	
E-mail:	
Reporting Information	
Submission Date:	
Name of Person Submitting Form:	
USG Approval (For internal purposes only)	
	JSG Agency:
A/COTR Approval (N	ame/Date):
SI Officer Approval (N	ame/Date):
Comments (Provide general comments if needed)	

Information by Program Area (to be completed by Partner) Selected Subtotals **Selected Totals** Location **Sub-National Unit**

Quick Worksheet Navigation Links

FBCTS
CBCTS
PMTCT
HTC
PEP
BS
OVC
SORP-GP
SORP-MARPS
VMMC
HSS

Add Comments								
FBCTS - Facility-based Care, Treatment, and Sup								
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Number of Cur	Number of Current Clinical Patients at Start of Pe type (Month 0)							
Current Adult Pre-ART patients (15+ years)	Current Pediatric Pre- ART patients (< 15 years)	T1.2.D: Current Adult ART patients (15+ years)						

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iod, by Patient-	Number of Cu	ırrent Clinical Pat Patient-typ	ients at Mid-poin e (Month 6)	t of Period, by	Number of Curre	nt Clinical Patient (Mon
T1.2.D: Current Pediatric ART patients (<15 years)	Current Adult Pre-ART patients (15+ years)	Current Pediatric Pre- ART patients (< 15 years)	T1.2.D: Current Adult ART patients (15+ years)	T1.2.D: Current Pediatric ART patients (<15 years)	Current Adult Pre-ART patients (15+ years)	Current Pediatric Pre- ART patients (< 15 years)

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s at End of Perioc th 12)	l, by Patient-type		Clinic Visit: Est ea	imate the average ch patient-type re	e number of time: eceived a clinic vi	s over the year sit
T1.2.D: Current Adult ART patients (15+ years)	T1.2.D: Current Pediatric ART patients (<15 years)		Adult Pre-ART patients (15+ years)	Pediatric Pre- ART patients (< 15 years)	Adult ART patients (15+ years)	Pediatric ART patients (<15 years)
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Add Comments

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Lab Tests: Estir patient-type rece her	nate the average n ived a lab test, incl natology tests, and	umber of times ove uding CD4 tests, bio viral load assessmo	er the year each ochemical panels, ents				Number of bene	
Adult Pre-ART patients (15+ years)	Pediatric Pre-ART patients (< 15 years)	Adult ART patients (15+ years)	Pediatric ART patients (<15 years)		Number of beneficiaries reached with CBCTS		Medical Care (not facility- based)	
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eatment, and S	upport		PMTCT - Preventing Moth	er-to-Child Transmission
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ficiaries receiving service c	g services in each ategories	of the following		P1.2.D:
Economic Strengthening	Psychological, Social, and Spiritual Care	Nutrition and food security	Number of Pregnant women tested for HIV and received results	Number of HIV-positive pregnant women who received antiretrovirals to reduce risk of mother-to- child-transmission

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		Of the reported number of for HIV and received resi identified positive fo	women and infants tested ults, indicate the number r HIV through PMTCT		н	
Number of HIV- exposed infants tested for HIV	Number of HIV- exposed infants who received HIV care	Pregnant Women	Infants		Number of individuals who received HTC services for HIV and received their test results	

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		(sum across modalities must equal total number receiving HTC)						
	PITC: Number of i through provider-ir couns	nitiated testing and	VCT: Number of i through voluntar test		CBTC: Number of through commun cou			
Number of Individuals tested and ntified as HIV positive	Number tested and received results	Number identified positive	Number tested and received results	Number identified positive	Number tested an received results			

	Add Comments	Add Comments	Add Comments	
	PEP - Post-Exposure Prophylaxis	BS - Blood Safety	OVC - Orphans and	Vulnerable Chil
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individuals tested y-based testing and seling				Estimate the nu
Number identified positive	P6.1.D: Number of persons provided with post-exposure prophylaxis (PEP)	P2.2.N: Number of Blood units collected	Number of OVC reached	Medical Care (not facility- based)

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dren				SORP-GP - Sexual and Other Risk Prevention, General Population
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mber of OVC ben the	eficiaries reachec following catego	I that received ser	rvices in each of	
Educational Support	Economic Strengthening	Psychological, Social, and Spiritual Care	Nutrition and food security	P8.1.D: Number of general population reached

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SORP-MARPs - Most-at-Risk Populations	VMMC - Voluntary Medical Male Circumcision	HSS - Health System Strengthening
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P8.3.D: Number of intended population (MARP) reached	P5.1.D: Number of Males Circumcised	H2.1.D: Number of new health care workers who graduated from a pre- service training institution

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FBCTS

CBCTS

PMTCT

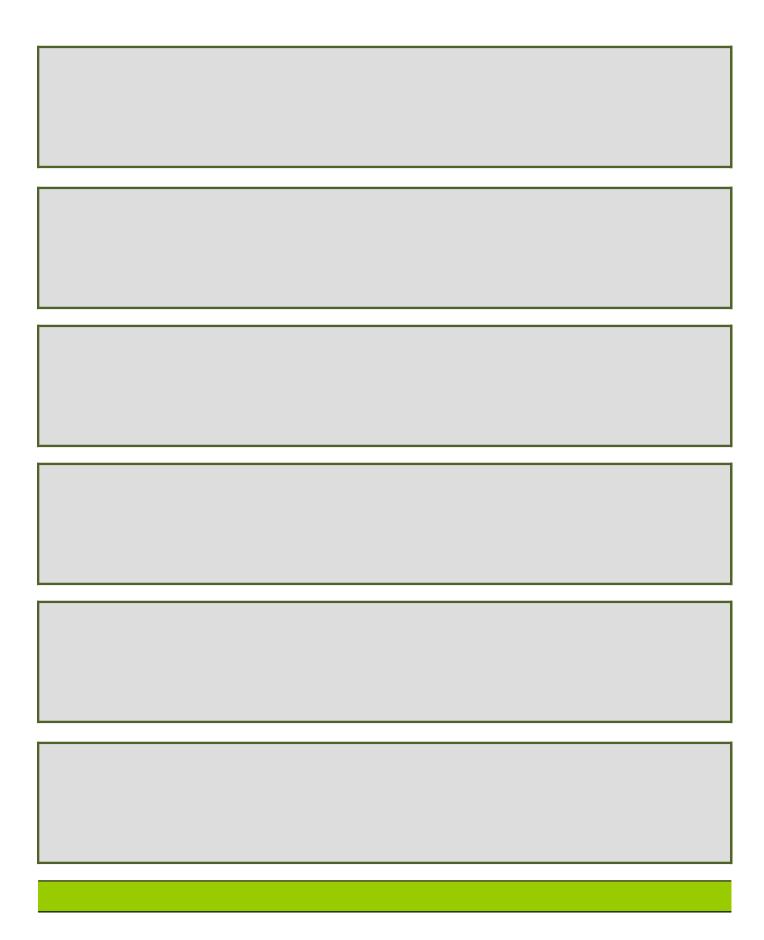
<u>VMMC</u>

<u>HTC</u>



Program Information - Comments

Please use the space below to provide comments that will aid in interpreting the data.



Return to Results Worksheet Program Information Return to Results Worksheet Program Information Return to Results Worksheet Program Information Return to Results Worksheet Program Information

Return to Results Worksheet <u>Program Information</u>

Return to Results Worksheet

Program Information

Return to Results Worksheet <u>Program Information</u>

Site-level Expenditures by Program Area (to be completed by Partner) Total Expenditures: Site-Lvl Expenditures: Area Totals Selected Subtotals **Selected Totals** Location **Sub-National Unit**

Quick Worksheet Navigation Links

FBCTS
CBCTS
PMTCT
VMMC
HTC
PEP
BS
LAB
IC
OVC
SORP-GP
SORP-MARPs

Add Comments

FBCTS - Facility-based Care, Tre		
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	Investment Expe	
Training (in- service)	Construction & renovation	

tment, and Su	tment, and Support						
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nditures (intege	er dollar amount)					Recu	
Vehicles	Equipment and furniture	Other investment expenditures*	Personnel	Antiretroviral drugs (ARVs)	Non-ARV drugs and reagents	HIV Test Kits	

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Expenditures	s (integer dollar ar	mount)			
Condoms	Other supplies	Food Supplements	Building rental and Utilities	Travel / Transport	Other site recurrent expenditures*

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nity-based Care,	, Treatment, an	d Support				
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Investment Expe	Investment Expenditures (integer dollar amount)					
Construction & renovation	Vehicles	Equipment and furniture	Other investment expenditures*	Personnel	Antiretroviral drugs (ARVs)	Non-ARV drugs and reagents

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Recurre	ent Expenditure	s (integer dollar an	nount)			
HIV Test Kits	Condoms	Other supplies	Food Supplements	Building rental and Utilities	Travel / Transport	Other site recurrent expenditures*

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Add Comments

					PMTCT - Preve	nting Mother-to-
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Record the amou category (Note exp	nt spent to support :: The sum of each I enditures for CBCT	cactivities in each b row must equal the S by Sub-National U	peneficiary service e total reported Jnit)			Investment Exp
Medical Care (not facility-based)	Economic Strengthening	Psychological, Social, and Spiritual Care	Nutrition and food security		Training (in- service)	Construction & renovation

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Child Transmission							
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enditures (intege	er dollar amount)					Recurr	
Vehicles	Equipment and furniture	Other investment expenditures*	Personnel	Antiretroviral drugs (ARVs)	Non-ARV drugs and reagents	HIV Test Kits	

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						Estimate
Expenditure	es (integer dollar an	nount)				
Condoms	Other supplies	Food	Building rental and Utilities	Travel /	Other site recurrent	HIV Testing
Jondonis	Other supplies	Supplements	and Utilities	Transport	expenditures*	Pregnar Womer

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percentage of total program effort spent on each ctivity (should total to 100 per row; ify each as integer value from 0 to 100)		Record the amou test kits that support wome	unt spent for HIV were used to en and infants	Record the am ARVs that were women ar	ount spent for used to suppo nd infants	
HIV Testing for Exposed Infants	Prevention and Care for Pregnant Women	Prevention and Care for Exposed Infants	Pregnant Women	Infants	Pregnant Women	Infants

MMC - Volun	tary Medical Mal					
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	Investment Expe	enditures (intege	r dollar amount)			
Training (in- service)	Construction & renovation	Vehicles	Equipment and furniture	Other investment expenditures*	Personnel	Antiretrovira drugs (ARVs)

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Recurrent Expenditures (integer dollar amount)

Non-ARV drugs and reagents	HIV Test Kits	Condoms	Other supplies	Food Supplements	Building rental and Utilities	Travel / Transport

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Add Comments

	HTC - HIV Testing and Counseling						
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		Investment Expe	nditures (intege	r dollar amount)			
e t es*	Training (in- service)	Construction & renovation	Vehicles	Equipment and furniture	Other investment expenditures*	Personnel	
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Recurrent Expenditures (integer dollar amount)

Antiretroviral drugs (ARVs)	Non-ARV drugs and reagents	HIV Test Kits	Condoms	Other supplies	Food Supplements	Building rental and Utilities

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			Record the total modality (sum a expenditure	expenditures spen across modalities r s for HTC for Sub-N	t for each testing nust equal total lational Unit)			
Travel / Transport	Other site recurrent expenditures*		PITC: Provider- initiated testing and counseling	VCT: Voluntary counseling and testing	CBTC: Community- based testing and counseling		Training (in- service)	

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sure Prophylaxis	<u> </u>					
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Investment Expe	enditures (integel	r dollar amount)				
Construction & renovation	Vehicles	Equipment and furniture	Other investment expenditures*	Personnel	Antiretroviral drugs (ARVs)	Non-ARV drugs and reagents

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Recurr	ent Expenditures	s (integer dollar ar	nount)						
HIV Test Kits	Condoms	Other supplies	Food Supplements	Building rental and Utilities	Travel / Transport	Other site recurrent expenditures*			

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BS - Blood Safe	ty					
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	Investment Exp	enditures (intege	r dollar amount)			
Training (in- service)	Construction & renovation	Vehicles	Equipment and furniture	Other investment expenditures*	Personnel	Antiretroviral drugs (ARVs)

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Recurrent Expenditures (integer dollar amount)

Non-ARV drugs and reagents	HIV Test Kits	Condoms	Other supplies	Food Supplements	Building rental and Utilities	Travel / Transport

Add Comments

	LAB							
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		Investment Expenditures (integer dollar amount)						
Other site recurrent penditures*	Training (in- service)	Construction & renovation	Vehicles	Equipment and furniture	Other investment expenditures*	Personnel		

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Recurrent Expenditures (integer dollar amount)

Antiretroviral drugs (ARVs)	Non-ARV drugs and reagents	HIV Test Kits	Condoms	Other supplies	Food Supplements	Building rental and Utilities

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		Estimate the per- each	Estimate the percentage of program effort spent on lab activities for each of the following (should total to 100%):				
Travel / Transport	Other site recurrent expenditures*	ART Lab Services	TB Diagnostics	EID	QA/QI	ART Lab Services	

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nt spent on <u>non-A</u> for ART, TB diagn (EI	nt spent on <u>non-ARV drugs and reagents</u> used to for ART, TB diagnosis and early infant HIV diagnosis (EID)		Record amou services for AR	nt spent on <u>suppl</u> Γ, TB diagnosis an	<u>ies</u> used specifica d early infant HIV	lly to support diagnosis (EID)
TB Diagnostics	EID	QA/QI	ART Lab Services	TB Diagnostics	EID	QA/QI
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IC - Infection Co	ontrol					
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	Investment Expe	enditures (intege	r dollar amount)			
Training (in- service)	Construction & renovation	Vehicles	Equipment and furniture	Other investment expenditures*	Personnel	Antiretroviral drugs (ARVs)

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Recurrent Expenditures (integer dollar amount)

Non-ARV drugs and reagents	HIV Test Kits	Condoms	Other supplies	Food Supplements	Building rental and Utilities	Travel / Transport

Add Comments

	OVC - Orphans and Vulnerable Children						
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		Investment Expe	nditures (intege	r dollar amount)			
e t es*	Training (in- service)	Construction & renovation	Vehicles	Equipment and furniture	Other investment expenditures*	Personne	
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Recurrent Expenditures (integer dollar amount)

Antiretroviral drugs (ARVs)	Non-ARV drugs and reagents	HIV Test Kits	Condoms	Other supplies	Food Supplements	Building rental and Utilities

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		Estimate to (Note: The sum of	he amount spent of each row must	to support activiti equal to the total Sub-National Unit	es in each service reported expend :)	category: itures for OVC by
Travel / Transport	Other site recurrent expenditures*	Medical Care (not facility- based)	Educational Support	Economic Strengthening	Psychological, Social, and Spiritual Care	Nutrition and food security

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SORP-GP - Sexu	ual and Other Ris	on				
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	Investment Expe					
Training (in- service)	Construction & renovation	Vehicles	Equipment and furniture	Other investment expenditures*	Personnel	Antiretroviral drugs (ARVs)

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Recurrent Expenditures (integer dollar amount)

Non-ARV drugs and reagents	HIV Test Kits	Condoms	Other supplies	Food Supplements	Building rental and Utilities	Travel / Transport

				SORP-MARPs -
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	Estimate the amount sp category (Note: The sur expenditur	pent to support SORP-GP a m of of each row must eq res for SORP-GP by Sub-Na	activities in each service ual to the total reported ational Unit)	
Other site recurrent expenditures*	Mass Media	Individual and/or Small Group-level Interventions	Prevention Interventions not classified as mass media, individual or small group	Training (in- service)

Most-at-Risk Populations							
					0		
0	0	0	0	0	0	0	
	0						
Investment Expe	enditures (integel	r dollar amount)					
Construction & renovation	Vehicles	Equipment and furniture	Other investment expenditures*	Personnel	Antiretroviral drugs (ARVs)	Non-ARV drugs and reagents	

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0	0	0	0	0	0	0			
		0							
Recurr	Recurrent Expenditures (integer dollar amount)								
HIV Test Kits	Condoms	Other supplies	Food Supplements	Building rental and Utilities	Travel / Transport	Other site recurrent expenditures*			

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SI and Surveillance Expenditures (to be completed by Partner) Total Expenditures: SI/Surv Expenditures: Selected Subtotals **Selected Totals** Location **Sub-National Unit**

Quick Worksheet

Navigation Links

<u>SI</u> <u>Surveillance</u>

Add Comments

SI - Strategic Information					
0	0				
	(
Above Site Level (select Sub-National Unit, National for Loc					
Personnel	Consultants (External)				

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SI expenditures I or Above Nation cation)	nal as appropriate		Indicate percentage (0 to 100) of SI expe				
Transport/ Travel	Other General/ Administrative	FBCTS	CBCTS	РМТСТ	VMMC	НТС	PEP

							Surveillance
							0
							A (select Sub-Na
es used to su	upport services	(each row sho	uld total to 100	0)			(select Sub-Na
BS	LAB	IC	OVC	SORP-GP	SORP-MARPs	HSS	Personnel

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ve Site-Level Surveillance expenditures nal Unit, National or Above National as appropriate for Location)

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Consultants (External)	Transport/ Travel	Other General/ Administrative

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Health System Strengthening (HSS) Expenditures (to be completed by Partner)

Total Expenditures:		
HSS Expenditures:		
		Selected Subtotals
		Selected Totals
	Location	
	Sub-National Unit	

Add Comments

HSS - Health System Strengthenin			
0	0		
	bove Site-Level hea ational Unit, Nation		
Personnel	Consultants (External)		

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0	0	0	0	0	0
0					
th system stren; al or Above Nat	gthening expenditure ional as appropriate	es for Location)			Fo
				Human Re	sources (HR)
Transport/ Trave	Construction and Renovation	Other General/ Administrative	Pre-service Training	Training of Trainers	Curriculum Development

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or each Sub-National Unit, record the total expenditures used to support services in each functional area: (Note: The sum of this table must equal the total spent to support HSS)

	Gover	nance		Sys	Systems Development			
HR Management and Retention	Technical-area Specific Guidelines, Tools and Policy	General Policy and Other Governance	Finance	Supply Chain Systems	Health Information Systems	Laboratory Strengthening		

0	0	0	0	0	0	0	0
			Indica	te the percenta	age (0 t o100) (of total HSS exp	enditures usec
Institutional and Develo	l Organizational pment						
Civil Society and Non- Governmental Organizations	Government Institutions	FBCTS	CBCTS	РМТСТ	VMMC	нтс	PEP

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support ea	ach of the follo	wing program a	areas (each row	v should total t	to 100)	
BS	Lab	IC	OVC	SORP- GP	SORP-MARPs	SI

Program Management Expenditures (to be completed by Partner) Total Expenditures: PM Expenditures: Selected Subtotals Selected Totals Location Sub-National Unit

Add Comments

PM - Program Management								
0	0	0						
0								
Above Site-Level Program Management expe (select Sub-National Unit, National or Above National a								

(select Sub-National Unit, National or Above National a Location)							
Personnel	Consultants (External)	Transport/ Travel					

Indicate percentage (0 to 100) of program management exper									
FBCTS	FBCTS CBCTS PMTCT VMMC HTC PEP BS								
	FBCTS	FBCTS CBCTS							

res used to	support service	es (each row s	hould total to	100)					
LAB	IC	OVC	SORP-GP	SORP-MARPs	SI	HSS			

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	1	1	

FBCTS

CBCTS

PMTCT

<u>VMMC</u>

<u>HTC</u>

<u>PEP</u>

<u>BS</u>

<u>LAB</u>

<u>IC</u>

<u>ovc</u>

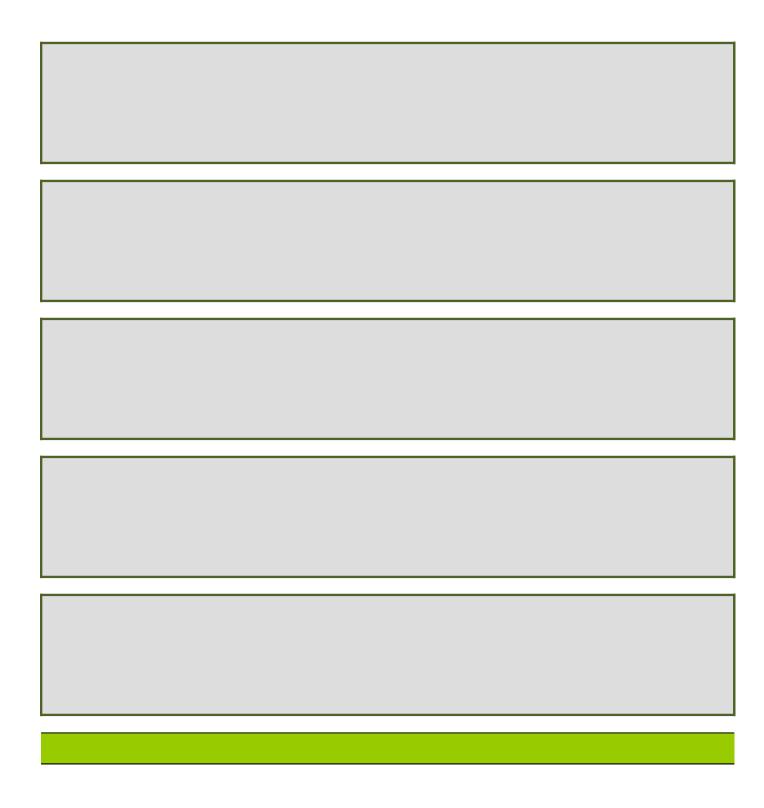
SORP-GP

SORP-MARPs			
<u>PM</u>			
			
CI.			
<u>SI</u>			
<u>Surveillance</u>			

HSS

Expenditures - Comments

Please use the space below to provide comments that will aid in interpreting the data.



Return to Expenditures Worksheet Site-Level
Return to Expenditures Worksheet Site-Level
Return to Expenditures Worksheet Site-Level
Return to Expenditures Worksheet Site-Level
Return to Expenditures Worksheet <u>Site-Level</u>
Return to Expenditures Worksheet

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Return to Expenditures Worksheet $$\underline{\rm PM}$$

Return to Expenditures Worksheet $\underline{\text{SI}}$

Return to Expenditures Worksheet <u>Surveillance</u>

Return to Expenditures Worksheet $\underline{\mathsf{HSS}}$

Site-level Expenditure Data Quality Checks

Data Quality Check Navigation Links

Expenditure - Site-Level

Expenditure - PM

Expenditure - SI

Expenditure - HSS

Expenditures - Site-Level Cell Row Sums :	X:AL = AN:AS
Location	CBCTS expenditures equal disaggregated expenditures?
Sub-National Unit	expenditures?

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If 'No!' appears anywhere in the table below please correct the corresponding Sub-National Unit row expenditure entries o

BA = BQ:BR	BC = BO:BP	BK:BN = 100	CJ:CX = CZ:DB
DA - DQ.DR	DC - DO.BF	DIV.DIA – 100	CJ.CA - CZ.DB
PMTCT recurrent ARV expenditures equal disaggregated ARV expenditures for women & infants?	PMTCT recurrent HIV Test Kit expenditures equal disaggregated HIV Test Kit expenditures for women & infants?	Distribution of PMTCT activities equals 100?	HTC expenditures equal disaggregated expenditures?

', n the Expenditures - Site-Level tab

EQ = FD:FG	ET = FH:FK	EZ:FC = 100	GC:GQ = GS:GX
LQ - FD.FG	LI - FH.FK	LZ.1 C = 100	GC.GQ - G3.GA
LAB recurrent Non-ARV expenditures equal disaggregated Non-ARV expenditures?	LAB recurrent Other Supplies expenditures equal disaggregated Other Supplies expenditures?	Distribution of LAB activities equals 100?	OVC expenditures equal disaggregated expenditures?

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	PM Expenditure Data Quality Checks	
	If 'No!' appears anywhere in the table below, please correct the corresponding Sub-National Unit row percentage entries on the Expenditures - PM tab	
GZ:HN = HP:HT	Expenditures - PM Cell Row Sums :	L:AE = 100
SORP GP expenditures equal disaggregated	Location	Distribution of PM expenditures by
expenditures?	Sub-National Unit	Program Area equals 100?

SI Expenditure Data Quality Checks **HSS Expenditure Data Quality** If 'No!' appears anywhere in the table below, If 'No!' appears an please correct the corresponding Sub-National Unit row please correct the corresponding Sub Expend percentage entries on the Expenditures - SI tab L:AC = 100 Expenditures - SI Cell Row Sums: Expenditures - HSS Cell Row Sums: Location Location Distribution of SI expenditures by Program Area equals 100? **Sub-National Unit Sub-National Unit**

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Checks

ywhere in the table below, -National Unit row percentage entries on the litures - HSS tab

Lures - HSS tab			
H:L = N:Y	Z:AR = 100		
Distribution of HSS expenditures equals total of HSS expenditures?	Distribution of HSS expenditures by Program Area equals 100?		

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