ANNEX VI

Model narrative and financial report - Interim Narrative Report

- This report must be completed and signed by the <u>Contact person of the Coordinator</u>.
- The information provided below must correspond to the financial information that appears in the financial report.
- Please complete the report using a computer.
- Please expand the paragraphs as necessary.
- <u>Please refer to Article 5 of the Special Conditions of your grant contract and send one copy of</u> the report to the address mentioned.
- The Contracting Authority will reject any incomplete or badly completed reports.
- The answer to all questions must cover the reporting period as specified in point 1.6.

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List of acronyms used in the report

1. Description

- **1.1.** Name of Coordinator of the grant contract:
- **1.2.** Name and title of the Contact person:
- **1.3.** Name of <u>Beneficiary(ies)</u> and <u>affiliated entity(ies)</u> in the Action:
- **1.4.** <u>Title</u> of the Action:
- **1.5.** Contract number:
- **1.6.** Start date and end date of the reporting period:
- **1.7.** Target <u>country(ies)</u> or <u>region(s)</u>:
- **1.8.** Final beneficiaries &/or target groups (if different) (including numbers of women and men):
- **1.9.** Country(ies) in which the activities take place (if different from 1.7):

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[&]quot;Target groups" are the groups/entities who will be directly positively affected by the project at the Project Purpose level, and "final beneficiaries" are those who will benefit from the project in the long term at the level of the society or sector at large.

2. Assessment of implementation of Action activities

2.1. Executive summary of the Action

Please give a global overview of the Action's implementation for the reporting period (no more than ½ page)

Please list the indicators of the Specific Objective and provide level of achievement if available at this stage:

SO. "Indicator 1": target value

SO. "Indicator 2": target value

2.2. Results and Activities

What is your assessment of the results of the Action so far? Include observations on the performance and the achievement of outputs, outcomes and impact in relation to specific and overall objectives, and whether the Action has had any unforeseen positive or negative results.

Following Annex 1, please list <u>all</u> the results with progress of the related indicators and all the related activities implemented during the reporting period.

R1 - "Title of result 1"

<quantify the achievement of each result from the beginning of the action and explain any changes, especially any underperformance; refer to the indicators and assumptions in the Logframe>:

1.1 "Indicator 1": target value (R1)

1.2 "Indicator 2": target value (R1)

1.3

<u>A1.1 – ''Title of the activity: Conference at location W with X participants for Y days on Z dates''</u>

Topics/activities covered <please elaborate>:

Reason for any <u>changes</u> in the planned activity <please explain any problems (e.g. delay, cancellation, postponement of activities) which have arisen and how they have been addressed> (if applicable):

Please list any risks that might have jeopardised the realisation of some activities and explain how they have been tackled.

A1.2 - "Title of activity 2"

. . .

R2 – "Title of result 2"

...

2.1 "Indicator 1": target value (R2)

2.2 "Indicator 2": target value (R2)

2.3 ...

<u>A2.1 - "Title of activity 1" (R2)</u>

. . .

A2.2 – Title of activity 2" (R2)

. . .

2.3. If relevant, submit a revised logframe, highlighting the changes.

Please list all contracts (works, supplies, services) above $\in 60.000$ awarded for the implementation of the action during the reporting period, giving for each contract the amount, the award procedure followed and the name of the contractor.

2.4. Please provide an updated action plan ².

Year													
	Half-year 1						Half-year 2						
Activity	Month 1	2	3	4	5	6	7	8	9	10	11	12	Implementing body
Example	example												Example
Preparation Activity 1(title)													Beneficiary or affiliated entity 1
Execution Activity 1(title)													Beneficiary of affiliated entity 1
Preparation Activity 2 (title)													Beneficiary or affiliated entity 2
Etc.													

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This plan will cover the financial period between the interim report and the next report.

3. Beneficiaries/affiliated entities and other Cooperation

- **3.1.** How do you assess the relationship between the Beneficiaries/affiliated entities of this grant contract (i.e. those having signed the mandate for the Coordinator)? Please provide specific information for each Beneficiary/affiliated entity.
- **3.2.** How would you assess the relationship between your organisation and State authorities in the Action countries? How has this relationship affected the Action?
- **3.3.** Where applicable, describe your relationship with any other organisations involved in implementing the Action:
 - Associate(s) (if any)
 - Sub-contractor(s) (if any)
 - Final Beneficiaries and Target groups
 - Other third parties involved (including other donors, other government agencies or local government units, NGOs, etc.)
- **3.4.** Where applicable, outline any links and synergies you have developed with other actions.
- **3.5.** If your organisation has received previous ICMPD and/or EU grants in view of strengthening the same target group, in how far has this Action been able to build upon/complement the previous one(s)? (List all previous relevant ICMPD and/or EU grants).

4. Visibility

How is the visibility of the EU/ICMPD contribution being ensured in the Action?

The European Commission and or ICMPD may wish to publicise the results of Actions. Do you have any objection to this report being published on the EuropeAid website or ICMPD website? If so, please state your objections here.

Name of the contact person for the Action:					
Signature:					
Location:					
Date report due:					
Date report sent:					