**INTERNATIONAL FOUNDATION FOR ELECTORAL SYSTEMS**

**(IFES)**

**Request for Proposals for Political Participation of Persons with Disabilities in Thailand**

**RFP/17/034**

**December 5, 2016**

**TABLE OF CONTENTS**

[1 INTRODUCTION 3](#_Toc441832549)

[1.1 Purpose 3](#_Toc441832550)

[1.2 Coverage & Participation 3](#_Toc441832551)

[1.3 Zero Tolerance for Fraud 3](#_Toc441832552)

[2 GENERAL INFORMATION 3](#_Toc441832553)

[2.1 The Organization 3](#_Toc441832554)

[2.2 Schedule of Events 3](#_Toc441832555)

[3 PROPOSAL PREPARATION INSTRUCTIONS 4](#_Toc441832556)

[3.1 Prospective Contractors’ Understanding of the Solicitation 4](#_Toc441832557)

[3.2 Information from IFES 4](#_Toc441832558)

[3.3 Communication 4](#_Toc441832559)

[3.4 Proposal Submission 5](#_Toc441832560)

[3.5 Criteria for Selection 5](#_Toc441832561)

[3.6 Selection and Notification 6](#_Toc441832562)

[4 SCOPE OF WORK 6](#_Toc441832563)

[5 FUNCTIONAL REQUIREMENTS 6](#_Toc441832564)

[5.1 Timeline 6](#_Toc441832565)

[5.2 Geographic Code 6](#_Toc441832566)

[5.3 License, Clearance and Approvals 6](#_Toc441832567)

[5.4 Packing 6](#_Toc441832568)

[5.5 Shipping 6](#_Toc441832569)

[5.6 Samples 7](#_Toc441832570)

[6 QUALIFICATIONS & REFERENCES 7](#_Toc441832571)

[7 PRICING 7](#_Toc441832572)

[8 ADDITIONAL TERMS & CONDITIONS 8](#_Toc441832573)

[8.1 Non-Disclosure Agreement 8](#_Toc441832574)

[8.2 No Collusion 8](#_Toc441832575)

[8.3 Companies Owned or Controlled by Government 8](#_Toc441832576)

[8.4 Subcontracting 9](#_Toc441832577)

[8.5 Costs 9](#_Toc441832578)

[8.6 Intellectual Property 9](#_Toc441832579)

[8.7 Prospective Contractors’ Responses 9](#_Toc441832580)

[8.8 Partial Awarding 9](#_Toc441832581)

[8.9 No Liability 9](#_Toc441832582)

[8.10 Entire Solicitation 9](#_Toc441832583)

[9 Prospective Contractor Certification 10](#_Toc441832584)

[SCHEDULE “A” 11](#_Toc441832585)

## INTRODUCTION

### Purpose

The purpose of this Request for Proposals (RFP) is to invite nonprofit organizations that support disabled persons’ access to the elections process in Thailand to submit a Response for the political participation of persons with disabilities in Thailand. The solicitation provides prospective implementing partners with the relevant operational and performance requirements.

### Coverage & Participation

IFES reserves the right to reject any and all offers, to add, delete or modify any element of the solicitation at any time without prior notification and without any liability or obligation of any kind. This RFP does not obligate IFES to enter into a contract nor does it obligate IFES to pay any costs incurred in the preparation of submission of any Response.

### Zero Tolerance for Fraud

IFES has zero tolerance for fraud. Fraud is any act or omission that intentionally misleads, or attempts to mislead, to obtain a benefit or to avoid an obligation. If you have concerns about potential fraud in any way related to IFES projects, contracts, or activities, please contact IFES’ Compliance Hotline at compliance@ifes.org.

## GENERAL INFORMATION

### The Organization

IFES is an independent, non-governmental organization providing professional support to electoral democracy. IFES supports citizens’ rights to participate in free and fair elections. Our independent expertise strengthens electoral systems and builds local capacity to deliver sustainable solutions.

As the global leader in democracy promotion, we advance good governance and democratic rights by:

* Providing technical assistance to election officials
* Empowering the underrepresented to participate in the political process
* Applying field-based research to improve the electoral cycle

Since 1987, IFES has worked in over 145 countries – from developing democracies, to mature democracies.

### Schedule of Events

The following, tentative schedule will apply to this solicitation. The dates may change in accordance with IFES’ needs or unforeseen circumstances. IFES will communicate changes to the schedule.

* Issuance of RFP December 5, 2016
* Technical Questions/Inquiries Due December 9, 2016 (5PM Bangkok time)
* Answers/Addenda from IFES December 14, 2016
* RFP Closes December 20, 2016 (5 PM Bangkok time)

## PROPOSAL PREPARATION INSTRUCTIONS

### Prospective Contractors’ Understanding of the Solicitation

Prospective contractors are responsible for understanding the solicitation in its entirety and each of its elements, and should make inquiries to IFES as necessary to ensure such understanding. IFES reserves the right to disqualify any prospective contractor that it determines, at its sole discretion, does not understand the solicitation or any of its elements. Such disqualification shall be at no fault, cost, or liability whatsoever to IFES.

### Information from IFES

All information provided by IFES in this solicitation is subject to change at any time. IFES makes no certification as to the accuracy of any item, and is not responsible or liable for any use of or reliance on the information or for any claims asserted therefrom.

### Communication

All communications related to the RFP must be in writing. Verbal communication shall not be effective unless formally confirmed in writing by the procurement official listed in 3.3.1. In no case shall verbal communication govern over written communication.

* + 1. **Point of Contact:** The sole point of contact for all communication related to this solicitation is listed below.

Elizabeth Durbin

Senior Contacts and Grants Manager

edurbin@ifes.org

* + 1. **Notice of Intention:** Prospective contractors that are interested in responding to this solicitation are encouraged to notify IFES of their interest in the RFP as soon as possible by completing and submitting the Notice of Intention herewith attached as Schedule A. However, the Notice of Intention is not mandatory and is not a prerequisite to submitting a Response.
		2. **Formal Communications** shall include, but are not limited to the following:
* Questions concerning this solicitation must be submitted in writing to the point contact identified in 3.3.1.
* Errors and omissions in this solicitation, as well as enhancements. Prospective contractors should notify IFES of any discrepancies, errors, or omissions that may exist within this solicitation. Prospective contractors should recommend to IFES any enhancements to the work described in the solicitation which might be in IFES’ best interests.
* Inquiries about technical interpretations must be submitted in writing to the point contact identified in 3.3.1.
	+ 1. **Addenda**: IFES will make a good-faith effort to provide a written response to the questions or requests for clarifications in the form of written responses or addenda in accordance with the *Schedule of Events in 2.2*.

### Proposal Submission

It is mandatory for prospective contractors to send proposals in electronic copy via e-mail in English to the individual listed in 3.3.1 on or prior to the closing date and time shown in the *Schedule of Events in 2.2*.

### Criteria for Selection

The evaluation of each Response to this solicitation will be based on the criteria outlined below. The purpose of this solicitation is to identify responsible, prospective contractors that have the interest, capability, and financial strength to supply IFES with the product and/or service identified in the Scope of Work.

**Evaluation Criteria:**

1. Technical Proposal (40%)
* *Specific response outlining steps to meet the technical requirements*
* *Project work plan to implement the Scope of Work*
1. Past Performance (15%)
* *Specific examples of similar projects successfully completed*
* *Examples of similar projects in which the subject matter is related to advocacy*
* *Established physical and institutional presence in Thailand*
* *Possess extensive experience in working with Election Commission of Thailand*
* *Demonstrated experience with international donor requirements, financial standards and reporting*
1. Organizational Capacity (20%)
* *Conduct the work required and to meet IFES’ reporting requirements*
* *Capable of organizing a series of advocacy meetings/workshops.*
* *Have in-house institutional expertise in developing and conducting electoral work and advocacy strategy.*
* *Demonstrated capacity to develop reports that incorporate monitoring & evaluation (M&E) data and lessons learned.*
1. Cost Proposal (25%)
* *Budget proposed is reasonable and cost effective*

**Evaluation Criteria Grading:**

Highly Exceeds Expectations 5 Points

Slightly Exceeds Expectations 4 Points

Meets Expectations 3 Points

Meets most but not All Expectations 2 Points

Does Not Meet Expectations 1 Point

### Selection and Notification

IFES will evaluate Responses to identify responsible contractors and responsive offers. Finalists will be selected to move into the negotiation phase of this process. Written notification will be sent to finalists via email.

## SCOPE OF WORK

The General Election Network for Disability Access (AGENDA) is a creative partnership between the International Foundation of Electoral System (IFES), disabled persons’ organizations (DPOs), and election-focused civil society organizations (CSOs) in Southeast Asia. The AGENDA network's principal objectives have been to promote election access in Southeast Asia and ensure that access to disability-inclusive political processes is on the human rights agenda of regional bodies. Since 2011, AGENDA has conducted various projects such as research, election monitoring, training and advocacy on election accessibility and political participation of persons with disabilities.

AGENDA seeks an implementing partner in Thailand to conduct three activities: 1) support the Election Commission (EC) of Thailand to gauge their preparedness for implementing accessible elections during each stage of the electoral process by establishing the **Election Management Body (EMB) Assessment Tool in Thailand;** 2)enhance DPO’s advocacy skills in Thailand by adapting the **Advocacy Toolkit on Political Participation for Disabled People’s Organizations in Thailand;** and 3)improve media reporting on persons with disabilities in Thailand by adapting the **Media Guidelines for Reporting Accessible Elections in Thailand.**

### Election Management Body (EMB) Assessment Tool

General Election Network for Disability Access (AGENDA) has developed a self-assessment tool for election management bodies to gauge their preparedness for implementing accessible elections during each stage of the electoral process. The tool can be used by EMBs to highlight critical gaps in preparations and to proactively address these issues. The assessment tool can be used as part of ongoing EMB strategic planning efforts as well as justification for additional state funding for accessibility improvements to elections in keeping with states’ Convention on the Rights of Persons with Disabilities (CRPD) commitments.  This tool was also designed to help guide an EMB with ideal timelines of implementing these preparations, such as procuring resources or training staff. The EMB Assessment Tool has already been adapted for the Indonesia context and successfully used by the EMB in that country’s elections.

The implementing partner is expected to implement the program through the following activities:

1. Tailor the EMB Assessment tool (Indonesian version) into the local context (Thailand version). *Note: The current Thai election law or election guidebook/manual must be used as a reference.*
2. Develop an advocacy strategy to introduce the tool to the EC of Thailand ensuring the EC will adopt/use the tool to provide an accessible upcoming general election.
3. Organize advocacy meetings and/or workshops with EC of Thailand to discuss the EMB Assessment tool and receive feedback from the EC.

### Advocacy Toolkit on Political Participation for Disabled People’s Organization

AGENDA is developing a resource toolkit to strengthen the capacity of DPO partners to engage government, EMBs, media and other electoral stakeholders on election accessibility and political participation. Although there are many widely available advocacy tools, none specifically address DPOs seeking direct engagement with government officials on political participation for persons with disabilities. AGENDA, therefore, will distil best practices on advocacy and adapt them to this context, offering targeted strategies on communications, messaging and other tactics. AGENDA will use the Advocacy Guidelines to conduct trainings with AGENDA partners and the DPO community in Indonesia and another ASEAN country.

The implementing partner is expected to implement the program through the following activities:

1. Tailor the advocacy toolkit (Indonesian version) into the local context (Thailand version), which will include the FGD to get inputs from the DPOs and CSOs who have expertise in advocacy and political participation for persons with disabilities.
2. Organize a workshop to train or to do a socialization to DPOs/ disabled young leaders who have less skill and knowledge on political participation of person with disabilities’ advocacy.
3. Develop an advocacy strategy to influence the election stakeholders in Thailand for the inclusive election and increase political participation for persons with disabilities.
4. Develop and implement the series of advocacy activities/meetings. This will be an action plan of the advocacy strategy.

### Media Guidelines for Reporting on Accessible Elections

### The media is a key partner and potential champion in raising public awareness about the importance of political rights for persons with disabilities. AGENDA has pushed for increased media awareness and focus through direct training of journalists, DPO engagement with the media and generating articles and radio/television interviews on these critical issues. AGENDA recognizes the importance of focused and informed media attention on the issues of political participation of persons with disabilities in order to increase the success and breadth of DPOs’ advocacy efforts. Through the development of media guidelines and workshops, AGENDA has increased the ability of journalists and editors to engage in thoughtful, accurate reporting.

The partner is expected to implement the program through the following activities:

1. Tailor the media guidelines (Indonesian version) to the local context (Thailand version).
2. Organize a one-day training to 20 journalists and invite the DPOS in training (5 people).
3. Organize a media competition based on the theme of the Yusdiana Memorial Award for Inclusive Journalism. The award will recognize journalists who produce content concerning participation in political and public life from a rights-based perspective. The partner can collaborate with institutions such as EMBs, universities, media associations or government bodies to promote and raise awareness of the award. In Indonesia, AGENDA collaborated with the Indonesian EMB and Press Council.

### Deliverables

The implementing partner will be responsible for the delivery, content, quality, and accuracy of deliverables. All deliverables must be written in English and submitted to IFES for approval.

The implementing partner is expected to submit the following deliverables:

EMB Assessment Tool:

* EMB Assessment Tool Thailand version.
* Advocacy strategy to introduce the tool to EC of Thailand.
* Report on advocacy meetings/workshops with EC of Thailand (5-10 pages) including an overview of the events, participant lists, challenges, opportunities, lessons learned, and recommendations.

Advocacy Toolkit:

* Advocacy toolkit Thailand version.
* Report (5-10 pages) on findings from FGD including an overview of the event, participant list, minutes of the meeting, challenges, opportunities, lessons learned, and recommendations.
* Report on the workshop (5-10 pages), including an overview of the event, participant list, challenges, opportunities, lesson learned, and recommendations.
* An advocacy strategy to influence election stakeholders in Thailand for a inclusive election and to increase political participation for persons with disabilities.
* Report (5-10 pages) on the implementation of advocacy strategy, including the report of all activities and meetings, challenges, opportunities, lesson learned, and recommendations.

Media Guidelines:

* Media Guidelines Thailand version.
* Report on media training (5-10 pages) including an overview of the event, participant list, challenges, opportunities, lesson learned, and recommendations.
* Report (5-10 ages) on the media competition including an overview of the event, participant list, challenges, opportunities, lesson learned, and recommendations.

## FUNCTIONAL REQUIREMENTS

### Timeline

Prospective contractors must submit a timeline in the Response showing the time required to produce and deliver services. IFES expects the services to be delivered on or about April 30, 2017.

### License, Clearance and Approvals

The prospective contractor will include in the timeline any time needed to obtain any licenses, clearances, and/or approvals required under local legal requirements to produce or deliver the products and/or services described in the Scope of Work.

## QUALIFICATIONS & REFERENCES

Prospective contractors must provide the following information for their Response to be considered:

1. A brief outline of the company and services offered, including:
* Full legal name and address of the company
* Corporate and tax Registration Documents
* Year business was started or established
* Full name of the legal representative (president or managing director) of the company
* Name of any individuals or entities that own 50% of more of the company
1. Evidence of successful completion of a project of a similar size and complexity.
2. References: Contact information for no less than three references from projects similar in size, application, and scope and a brief description of their implementation (including location and year). IFES reserves the right to request and check additional references.
3. Staffing information: Qualifications and experience of the members of the applicant’s staff who will work directly on this project, supplemented by a CV or resume; the number of staff used for strategy development, implementation of events, and administration of funds; and an organizational chart reflecting staff expected to support this project.
4. Prospective contractor must be legally registered under the laws of the country in which they are organized and possess all licenses, permits and government approvals necessary for performance of the Scope of Work.
5. A certification signed by an officer or authorized representative that the prospective contractor has sufficient financial, technical and managerial resources and facilities to complete the Scope of Work.

## PRICING

Prospective implementing partners must provide a budget in the attached template in Thai Baht (THB).

## ADDITIONAL TERMS & CONDITIONS

### Non-Disclosure Agreement

IFES reserves the right to require the prospective contractor to enter into a non-disclosure agreement.

### No Collusion

Collusion is strictly prohibited. Collusion is defined as an agreement or compact, written or oral, between two or more parties with the goal of limiting fair and open competition by deceiving, misleading, or defrauding a third party.

### Companies Owned or Controlled by Government

The prospective contractor must disclose in writing with its Response if a government, its agents, or agencies, have an ownership or managerial interest in the company. Failure to disclose a government ownership of managerial interest in the company will result in the prospective contractor’s offer being removed from consideration.

### Subcontracting

No subcontracting is allowed under this solicitation.

### Costs

The solicitation does not obligate IFES to pay for any costs, of any kind whatsoever, which may be incurred by a prospective contractor or third parties, in connection with the Response.

### Intellectual Property

Prospective contractors may not use any intellectual property of IFES including, but not limited to, all logos, trademarks, or trade names of IFES, at any time without the prior written approval of IFES.

### Prospective Contractors’ Responses

All accepted Responses shall become the property of IFES and will not be returned.

### Partial Awarding

IFES reserves the right to accept all or part of the Response when awarding a contract.

### No Liability

IFES reserve the right to accept or reject any Response or to stop the procurement process at any time, without assigning any reason or liability. IFES shall not be liable to any prospective contractor, person, or entity for any losses, expenses, costs, claims, or damages of any kind.

### Entire Solicitation

This solicitation, any addenda to it, and any attached schedules, constitute the entire solicitation.

## Prospective Contractor Certification

This certification attests to the prospective contractor’s awareness and agreement to the content of this solicitation and all accompanying schedules and provisions contained herein.

The prospective contractor must ensure that the following certificate is duly completed and correctly executed by an authorized officer.

This Response is submitted in response to RFP/17/034 issued by IFES. The undersigned is a duly authorized officer, hereby certifies that:

|  |
| --- |
|  |

(Prospective Contractor’s Legal Name)

agrees to be bound by the content of this Response and agrees to comply with the terms, conditions, and provisions of the referenced solicitation and any addenda thereto in the event of an award. The Response shall remain in effect for a period of 90 calendar days.

The undersigned further certify that the prospective contractor and its principals (check one):

⬜ IS

⬜ IS NOT

currently debarred, suspended, or proposed for debarment by any U.S. Federal entity. The undersigned agree to notify IFES of any change in this status, should one occur, until such time as an award has been made under this procurement action.

Person[s] authorized to negotiate on behalf of the prospective contractor for purposes of this solicitation are:

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Title: |  |
| Signature: |  | Date: |  |
| Name: |  | Title: |  |
| Signature: |  | Date: |  |

**Signature of Authorized Officer:**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Title: |  |
| Signature: |  | Date: |  |

## SCHEDULE “A”

**NOTICE OF INTENTION**

**RFP/17/034**

From:

 Name: [*INSERT COMPANY’S LEGAL NAME*]

 Contact: [*INSERT NAME OF AUTHORIZED REPRESENTATIVE*]

 Phone: [*INSERT TELEPHONE NO.*]

 Fax: [*INSERT FAX NO.*]

 Email: [*INSERT E-MAIL*]

Please state your intention with regard to this Request for Proposals by selecting one of the following:

[ ] Intends to respond to the IFES solicitation

[ ] Does not intend to respond to the IFES solicitation

TO:

International Foundation for Electoral Systems

Attention: Elizabeth Durbin

Title: Senior Contracts and Grants Manager

E-mail: edurbin@ifes.org

**Template A:**

**PRE-AWARD SURVEY**

**OF ACCOUNTING SYSTEMS**

**AND FINANCIAL CAPABILITY QUESTIONNAIRE**

**FOR**

**NON-US NGO SUBRECIPIENTS**

Acceptance of a subaward from **IFES** creates a legal duty on the part of the subrecipient to use the available funds in accordance with the provisions of the subaward and applicable U.S. Federal regulations.

The purpose of this questionnaire is to provide IFES with current information to assess the financial and organizational capacity of a prospective subrecipient and to identify any need for technical assistance to ensure proper accountability in the event a subaward is made. All information requested in the questionnaire should be answered in English as completely as possible, using supplemental sheets if necessary.

The subrecipient’s questionnaire should be returned to IFES as soon as possible. If the proposal is accepted for consideration, the subrecipient’s completed questionnaire must be received prior to the issuance of a subaward by IFES.

**SECTION A: General Information**

Please complete this section which provides general information on your organization.

**Legal Name of Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 (if different)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other (Email) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **What is your organization type (profit, non-profit, private volunteer organization, university, etc.)?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Is your organization incorporated or registered?**

 **Yes:** 🞎 **No:** 🞎

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **When and where was your organization incorporated or registered?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Please provide a copy of your organization’s incorporation or registration certificate.**

 **Enclosed:** 🞎 **Not enclosed (Explain):** 🞎

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **What is your organization’s tax status?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Please provide a copy of any information which describes your organization, its mission and history:**

 **Enclosed:** 🞎 **Not enclosed (Explain):** 🞎

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Is your organization affiliated with any other organization:**

 **Yes:** 🞎 **No:** 🞎

 **If yes, please provide details:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Please list the names of the following individuals:**

 **President/Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Secretary \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Chief Financial Officer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Controller/Accountant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **List the number of employees of your organization:**

 **Full-Time Employees: \_\_\_\_ Part-Time Employees: \_\_\_\_ Consultants: \_\_\_\_\_**

1. **Enter the beginning and ending dates of your organization’s fiscal year:**

 **From (Month, Day) \_\_\_\_\_\_\_\_\_\_\_\_\_\_ To (Month, Day) \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Financial Information. Please complete the requested information and provide a copy of your most recent financial reports.**

**Current year information (indicate period) \_\_\_\_\_\_\_\_\_\_**

**Revenues: U.S.D. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Local Currency : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Expenses: U.S.D. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Local Currency : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Assets U.S.D. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Local Currency : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Liabilities: U.S.D. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Local Currency : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Exchange Rate: \_\_\_\_\_\_\_\_\_\_\_\_ per $1 U.S.D.**

**Prior year information (indicate period) \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Revenues: U.S.D. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Local Currency : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Expenses: U.S.D. $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Local Currency : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Exchange Rate: \_\_\_\_\_\_\_\_\_\_\_\_ per $1 U.S.D.**

1. **Will your organization have other sources of U.S.Government funds during the period of the IFES subaward**

 **Yes:** 🞎 **No:** 🞎

 **If Yes, what is the estimated value of U.S. Government funding that your organization receives per year?**

 **$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SECTION B: Internal Controls**

**Internal controls are procedures which ensure that: 1) financial transactions are approved by an authorized individual and are consistent with laws, regulations, and the organization’s policies, 2) assets are maintained safely and controlled, and 3) accounting records are complete, accurate, and are maintained on a consistent basis.**

 **Please complete the following questions concerning your internal controls:**

1. **List the name and position title for the following area(s):**

* + **Responsible for cash, bank accounts, or equipment.**

**Cash: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Bank Account: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Equipment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* **Responsible for reviewing expenditures to make sure they are allowable.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* **Responsible for keeping all receipts and other documentation to support expenses charged to this grant.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* **Responsible for signing checks.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* **Responsible for maintaining the accounting records.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* **Responsible for reconciling bank statements to the accounting records.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* **Responsible for preparing financial and narrative reports.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Describe the types of reconciliations performed, and how frequently they are performed.**

 **Type of reconciliation Frequency**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Are timesheets maintained for each employee who is paid?**

 **Yes:** 🞎 **No:** 🞎

1. **Is each employee’s salary documented in an employment letter or contract?**

 **Yes:** 🞎 **No:** 🞎

1. **Do you maintain inventory records?**

 **Yes:** 🞎 **No:** 🞎 (if no, explain)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **How often do you check inventory records to the actual inventory?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SECTION C: Accounting system**

**The purpose of an accounting system is to: 1) accurately record all financial transactions, and 2) ensure** **that financial transactions are supported by invoices,** **timesheets or other documentation. The type of** **accounting system often depends upon the size of an organization. Some organizations may have computerized** **accounting systems while others use a manual system to record each transaction in a ledger.**

**In all cases,** **IFES’ subaward** **funds must be properly authorized, used for the intended purpose** **and recorded in an organized and consistent manner.**

1. **Briefly describe your organization's accounting system. At a minimum, describe: a) any manual ledgers used to record transactions (general ledger, cash disbursements ledger, accounts payable ledger, etc);** **b) any computerized accounting system used (please indicate the type);** **c) how recorded transactions are summarized for** **financial reporting purposes, and** **d) the frequency of financial reports.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Do you have written accounting policies and procedures?**

 **Yes:** 🞎 **No:** 🞎

1. **Are your financial reports prepared on a:**

 **Cash basis:** 🞎 **Accrual basis:** 🞎

1. **Can the accounting records identify the receipts and payments of an IFES grant from the receipts and payments of other activities?**

 **Yes:** 🞎 **No:** 🞎

1. **Can the accounting records summarize payments by budget category?**

 **Yes:** 🞎 **No:** 🞎

1. **How will you ensure that line item and overall budget limits for the IFES subaward will not be exceeded?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Do you maintain invoices, vouchers, and timesheets for all payments made from subaward funds?**

 **Yes:** 🞎 **No:** 🞎

1. **Are there any circumstances in which invoices, vouchers, and timesheets cannot or will not be obtained?**

 **Yes:** 🞎 (explain) **No:** 🞎

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Briefly describe your organization’s system for filing and maintaining supporting documentation.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Will you be able to maintain accounting records including invoices, vouchers, and timesheets for at least three years after the final financial report is submitted?**

 **Yes:** 🞎 **No:** 🞎 (explain)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Do you have an audited indirect cost rate?**

 **Yes:** 🞎 (enclose approved rates) **No:** 🞎

**SECTION D: Funds Control**

**IFES’** **subrecipients receiving advances of subaward funds must maintain a separate bank account for** **IFES’ funds. Access to the bank account should be limited to authorized individuals. Bank balances should be reconciled periodically to the accounting records. If cash cannot be maintained in a bank, it is very important to have strict controls over its maintenance and disbursement.**

1. **Can a separate bank account be established just for IFES’ subaward funds?**

 **Yes:** 🞎 **No:** 🞎

1. **Will any cash from IFES funds be maintained outside the bank (in petty cash form, etc.)?**

 **Yes:** 🞎 **No:** 🞎

 **If yes, please explain the amount of funds to be maintained, the purpose and person responsible for safeguarding these funds.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **If you don’t have a bank account, what do you do to make sure that cash is maintained safely?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **If IFE’S subaward funds will be held in a non-U.S. bank, please answer the following:**
	1. Are bank deposits insured by the government?

 **Yes:** 🞎 **No:** 🞎

* 1. Do you intend to convert U.S. currency to foreign currency?

 **Yes:** 🞎 **No:** 🞎

* 1. Are there any government restrictions on the number of bank accounts a single organization may maintain?

 **Yes:** 🞎 **No:** 🞎

* 1. Are there any government or bank restrictions on the use of checks for making payments or withdrawals? (Please explain.)

 **Yes:** 🞎 **No:** 🞎

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* 1. Are checks usually accepted by vendors?

 **Yes:** 🞎 **No:** 🞎

* 1. Will it be possible for you to establish a bank account in U.S. dollars?

 **Yes:** 🞎 **No:** 🞎

* 1. Are there any government or bank restrictions, taxes, or other charges that will be placed on U.S. dollar bank accounts? (Please explain.)

 **Yes:** 🞎 **No:** 🞎

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 1. Are there any taxes or other charges when converting U.S. dollars to local currency? (Please explain).

 **Yes:** 🞎 **No:** 🞎

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION E: Audit**

**IFES’ subaward provisions may require an audit to be performed of your accounting records. Please provide the following information on prior audits of your organization.**

1. **Have external accountants ever performed an audit of your organization’s financial statements?**

 **Yes:** 🞎 **No:** 🞎

1. **If an audit was performed, please provide this office with a copy of your most recent report.**

 **Enclosed:** 🞎

1. **Does your organization have regular audits?**

 **Yes:** 🞎 **No:** 🞎

1. **If yes, who performs the audit and how frequently is it performed?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **If you receive an IFES’ subaward, will IFES’ subaward funds be included in such an audit?**

 **Yes:** 🞎 **No:** 🞎 **N/A (not applicable):** 🞎

1. **If yes, would it appear as a separate project?**

 **Yes:** 🞎 **No:** 🞎 **N/A:** 🞎

1. **Would the report be prepared in, or translated into English?**

 **Yes:** 🞎 **No:** 🞎 **N/A:** 🞎

1. **Are there any reasons (local condition, laws, or institutional circumstances) that would prevent an independent accountant from performing an audit of your organization?**

 **Yes:** 🞎 **No:** 🞎

**If yes, please provide details:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Prepared by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Printed Name Signature**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Title Date**

**Approved by:**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Printed Name Signature**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Title Date**

**Please include any additional comments here:**

**Template B: Budget**

