Annex 7

**Final report**

Project number:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Q | S | F |  |  |  |  |  |  |  |

Project title:

The QSF Coordinator submits the following final report, which relates to the period from

 (project start date) to

(project completion date), i.e. a total duration of months.

**I. Technical assessment**

|  |
| --- |
| *1.1 Completed activities to date (as per project plan approved by the QSF Board): Specify all the activities undertaken to implement the project, in particular whether all tasks/phases/activities related to the project were completed and equipment/vehicles were purchased (photos must be attached).* *Include a detailed explanation of the challenges encountered in project implementation, if any. If actual implementation deviated from the project implementation plan approved by the Board, please provide a detailed explanation. Any changes to the allocation plan of vehicles/equipment approved by the Board must also be justified.* |
|

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *No.* | *Activity planned (description)* | *Planned timeline* | *Actual completion date*  | *Comments, including non-completion of project activities* |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |

*1.2 Detailed information on whether this project has achieved the objectives of the DO’s quality development plan and how the project added value in terms of the overall quality of service of international mail.* |

Project number:

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Q | S | F |  |  |  |  |  |  |  |  |

|  |
| --- |
| *2.1 Results obtained with reference to the project’s objectives and the quantified quality indicators (as mentioned in the notification of unconditional approval of the project). Attach QCS/GMS/IPS reports or other monitoring reports to substantiate the results achieved.*  |
|

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *No.* | *KPI (description)* | *Targeted level upon project completion*  | *Actual level achieved*  | *Detailed explanation concerning results achieved, including non-achievement of KPIs* |
| 1 |  |  |  | (See Annex No.) |
| 2 |  |  |  | (See Annex No.) |
| 3 |  |  |  | (See Annex No.) |

*2.2 In the event of non-achievement of any KPI, provide the action plan envisaged to address the situation.*

|  |  |  |  |
| --- | --- | --- | --- |
| No. | *KPI (not achieved)* | Action plan to achieve the KPI | Target date  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

 |

|  |
| --- |
| *3 Special events listing: List any incidents or exceptions that may have occurred within the framework of the project (excluding already approved project change requests), or any other information requested by the Board in its notification of unconditional approval of the project proposal.* |
|  |

Project number:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Q | S | F |  |  |  |  |  |  |  |

**II. Financial assessment**

|  |
| --- |
| *4.1 Final procurement: List all the equipment/vehicles/services procured under the project. Clearly specify the quantity approved versus the quantity procured. Any variation between the quantity approved and the quantity procured must be justified.* |
|

|  |  |  |  |
| --- | --- | --- | --- |
| *Equipment/vehicles/services (description)* | *Quantity approved* | *Quantity procured*  | *Reasons for variation*  |
|  |  |  |  |
|  |  |  |  |

*4.2 Final budget (in USD): Report all the costs/expenditures financed under the QSF in terms of the budget items approved by the Board. Every cost within the QSF budget must be supported by the corre­sponding original invoice[[1]](#footnote-2) (to be attached to the report with the request for payment of the balance, if any). For complex projects, please attach the final statement of accounts certified by the QSF financial contact of the DO.*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| *QSF budget item approved (description)* |  | *Quantity procured* | *Budget approved (USD)*  | *Actual costs (currency of invoicing)* | *Exchange rate* | *Actual costs (USD)* | *Invoice reference* |
| A |  | B | C | D | E | F | G |
| E.g. Barcode printers |  | 5 | 2,000 | 1,650 EUR | 1.20 | 2,895.40 | Annex No. |
|  |  |  |  |  |  |  |  |
| **Total** |  |  | **2,000** |  |  | **2,895.40** |  |

*Example:**Exchange rate(s) used in the table above:**1 USD = 0.87803 EUR (at DD/MM/YYYY, date of the invoice)*

|  |  |
| --- | --- |
| Final budget (USD) (lower of the total of column C or F of the table above) | 2,000 |
| Less QSF disbursement |  |
| Balance due to QSF/DO |  |

*Note: Any amount due to the DO will be paid upon completion of the financial audit and approval by the QSF Board. Any amount due to the QSF, upon completion of the financial audit and approval by the QSF Board, must be reimbursed by the DO within six weeks of the project closure.*  |

Place:

Date:

Name of the QSF Coordinator:

Signature of the QSF Coordinator:

1. Only original documents, or copies certified as true by the QSF Coordinator, dated and bear­ing the QSF Coordinator’s signature and the organization’s stamp, will be accepted. [↑](#footnote-ref-2)