Challenge Facility for Civil Society (CFCS) Name of Organization: Общественное объединение "Committee on Monitoring of Penal Reforms and Human Rights"



**FINAL REPORT** 

#### **OF THE PROJECT**

#### «Civil participation in the prevention of a tuberculosis in jails in the Pavlodar area »

#### 1. Narrative Report

Please type or print clearly. You may attach up to 5 additional pages for this section.

#### 1.1 Summary Status Table

- Please read the document 'guidance for CFCS applicants' before completing this table
- Outputs are immediate results achieved as a consequence of the activities carried out. They are usually measured in units of service (for **example**, the number of persons you trained or number of policy meetings held).
- Outcomes are not what you do, but what changes for the people or groups you serve or health services that you are advocating for. They are measurable changes in health, behaviors, health care services, or policies. Outcomes should always be measured with indicators that describe your outcome in numerical terms (for example; the number of people who go for testing, the percentage of patients who default, measurable changes that show increased collaboration between TB and HIV services etc).
- Your target output must use the same indicator as your achieved output. Similarly, your target outcome must be measured in the same way as your achieved outcome (an example of this is in the table 3.1 in completion report template below).
- Your targets (output and outcome) are what you hope to achieve. Your targets are then compared to what you actually achieved.

Objective	Activity	Target Output	Achieved OutPUT	Target outCOME	Achieved Outcome so far (if any at this point)
[use "Insert Row" or "Merge Cell" from					
" <u>Table</u> " menu in	Training condemned and	Realization of	Realization 30 of	900 men are	The knowledge in questions
Microsoft Word menu	employees of prison	trainings	trainings	trained from	of preventive maintenance of
	establishments to questions of			among	a tuberculosis has raised
	preventive maintenance of a			condemned and	

	tuberculosis			personnel on preventive maintenance of a tuberculosis	
bar to add as many additional rows, merge or delete as required] Decrease of a tuberculosis among the prison population (personnel and condemned)	Distribution of an information material on preventive maintenance of a tuberculosis	Development, release and distribution educational materials on preventive maintenance of a tuberculosis - booklets, - poster	3000 booklets, 300 poster is widespread in 5 prison establishments of the Pavlodar area	5000 condemned, their relatives and employees of prison establishments have received the information on preventive maintenance of a tuberculosis	The booklets are widespread among 5000 men: condemned, employees of establishments, participants of a round table. 300 posters are placed in groups, in rooms for appointments, in administrative rooms in 5 prison establishments.
	Realization of monitoring in prison establishments	Visiting of prison establishments	Is carried out 21 monitorings	During 21 visits to prison establishments of the Pavlodar area the objective information on a tuberculosis is received	To administration of prison establishments is submitted 21 reports on results of monitoring with the recommendations for correction of the revealed lacks
	Individual work with condemned, patients TB, about necessity of end of treatment	Conversations, advice from the patients TB before exit on freedom. The analysis of continuity Treatments of the patients by	The analysis is carried out, the information on statement on the account of the persons of the patients TB, conclusion, exempted from	The analysis for 2010 and for 6 months of 2011 is carried	90 % condemned, patients ТБ, which after an exit on freedom have continued to be treated

		a tuberculosis after exit on freedom.	Prisons, is received		
Protection of health of the population of the Pavlodar region	Individual work with condemned, patients TB, on increase of prompting to end of treatment	Consultation of the patients a tuberculosis	The advisory help 300 patients TB is rendered	300 patients are consulted	The lists condemned, patients TB, which has received the information,
Attraction of attention on the part of the state and society to problems of prison establishments.	Realization of information campaign. Illumination of problems of prison establishments, problems of the patients by a tuberculosis in prisons and persons, which leave from prisons with the diagnosis a tuberculosis.	The publications in mass media. Realization of a round table with the invitation of the interested persons.	14 clauses are published. 1 round table is carried out	12 publications and 1 round table are planned.	2 clauses in a magazine of Committee of system of prisons of Republic of Kazakhstan « Execution of punishments », 1 clause in the collection of the reports for 2010 are published. Penal Reform International - region of distribution Republic of Kazakhstan, 1 clause in a magazine «Cooperation», 3 information bulletins (region of distribution the Pavlodar area), 6 clauses in the local newspapers and 1 in the central newspaper « the Kazakhstan truth ». On a round table have discussed a situation with tuberculosis among the prison population, problems of treatment of those patients, which leave from up to the end of treatment and problems which can

		arise	for	the	pati	ents
		tubercu	losis	in	case	of
		closing	pris	son	for	the
		patients	s TB.			

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## **1.3 Please describe any unexpected outcome(s) of the funded grant activities that are not listed in the table above.**

Unexpected results we have not. All measures were carried out according to the plan.

#### 1.4 What have been the challenges thus far with implementing the grant?

The problems with realization of design measures were not. All partners under the project actively participated. The management of prison system of the Pavlodar area assisted in organization of measures.

## **1.5** How has monitoring and data gathering helped the implementation of the grant?

Visiting prisons, we carried out conversations with condemned and personnel, found out a level of knowledge about a tuberculosis. The results were taken into account at realization of trainings. Paid special attention to such questions, as - way of distribution of a tuberculosis, that promotes disease and measure of preventive maintenance. At visiting inhabited premises, where are placed condemned, paid attention to presence of an information material on preventive maintenance TB, it was in all establishments. The edition of an information material - posters and booklets, has allowed to distribute among condemned and employees on trainings, during monitoring, at consultation the booklets in the Kazakh and Russian languages, to place in inhabited premises on stands posters.

These measures promoted education condemned on questions TB. In the further management of establishments in 2011 has allocated money for the edition own posters. Carried out sanitary - the educational measures in establishments are recommended for making active. It is necessary to enter interactive techniques of education, for what it is necessary to train the medical personnel of establishments and to allocate sufficient means for purchase of the equipment and literature. During monitoring we paid attention to conditions of residing condemned, on which the condition of health and, in particular, on danger of infection TB depends. Condemned the importance of observance of a correct mode of airing was explained, what harm to health put the harmful habits. It was possible to a management of establishments up to the item of information lacks revealed during monitoring. During design activity the conditions of residing were improved: was duly carried out repairs of premises, which used condemned, the temperature mode was supported, the stipulated norms of meal were observed.

The results of monitoring and recommendation for elimination of lacks were reflected in the reports. The reports were given to a management of Department criminal executive system of the Pavlodar area. A management of establishments reacted to the remarks and eliminated whenever possible lacks.

## **1.6** Course of Action: What changes are you considering that might improve your efforts and your performance?

Our organization will spend regular public monitoring of prison establishments of the Pavlodar area, the monitoring covers a component - right on health and further we plan to continue measures directed on struggle with tuberculosis.

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## **1.7** How can CFCS staff be helpful in terms of building capacity and going smoothly through the grant cycle?

**CFCS** can giving a material about measures directed on struggle with TB in the world, posters, booklets, statistical data. The given material we shall transfer to the medical personnel and condemned.

## 2. Please provide the contact details of at least 2 main stakeholders to this grant that you have worked with closely (e.g. local health authorities, target community, partners)

Stakeholder	Phone number	Email address	Location
Regional anti- tuberculosis dispensary	The main doctor Buldubaev Beibut 8(7182) 607011 Reception chief physician	dots@ekci.kz	Kamzina str. 275 Pavlodar
Department of the prison system of Pavlodar region	The chief Alymenov Abdill – Nasir 8(7182) 545962 Reception chief physician 8(7182) 650352 Medical department	Kuis pavlodar@mail.kz	Pavlova str. 1 1, Pavlodar

#### 3. Please complete the 'CFCS Financial Report Form' (annex I)

#### COMPLETION REPORT

## **1. Please provide a copy of the grant budgeting expenses** *(you may attach it to this report)*

At the end of the financial report, please add an acquittal declaration signed by an appropriately authorised officer of the funded organisation stating the following:

'I declare that:

- this report is complete and accurate
- the acquittal is a correct record of income and expenditure for this project
- the expenditure detailed in the acquittal has been extracted from the organisation's financial accounting records
- a detailed record of income and expenditure at an individual item level is available
- the funds allocated to this project were used in accordance with the contract and the Application Form, including any variations to the project approved by the Stop TB Partnership Secretariat in writing.'

#### Signature:

Full name of authorised officer: Kovlyagina Svetlana Position in the organisation: President Date: 20.09.2011.

## *Name of Organization:* Общественное объединение "Committee on Monitoring of Penal Reforms and Human Rights"

2. Abstract (10-line summary of the project results & outcome)

1. For the accounting period all planned measures were executed. The employees prison system and civil medicine actively helped in realization of the project.

2. Because of the incorporated efforts of the purpose of the project the tasks are achieved also are executed.

3. The cases of a tuberculosis in prisons of the Pavlodar area have decreased.

4. The executed activity of education has permitted to lift a level of the condemned knowledge and serving establishments on preventive maintenance tuberculosis. Thus various ways of submission of the information - training, individual advice, distribution of an information material were used.

5. The executed testing has shown positive dynamics on increase of the condemned understanding and employees on tuberculosis at a level 20 %.

6. The realization of monitorings has allowed in time to reveal lacks, both on conditions of the contents, and on preventive maintenance of a tuberculosis, that was reflected in the reports to a management establishment. The measures, accepted by a management, were directed on improvement of a situation. In particular, on decrease of number condemned and improvement of their conditions.

**7.**The realization of individual advices for condemned, patients by a tuberculosis, has raised motivation to end of a rate of treatment. Among consulted there was a group of the patients, which were soon released and have continued treatment in civil establishments. The carried out analysis shows high result of continuity of treatment after exit from prison - 90 % of the patients have continued treatment.

8.Due to the project the knowledge of a tuberculosis among civilians through the publications in mass media, realization of a round table, distribution of an information material (booklets, posters) in rooms of appointments condemned with the relatives has raised.

9.The realization of regular monitoring of prison establishments has allowed in time to react to the decision of prison administration on closing the specialized prison for the patients by a tuberculosis owing to small quantity(amount) of the patients condemned. We have addressed to the Ministry of public health services, National Centre on struggle with a tuberculosis, to the Representative under the rights of the man and have expressed concern to that the similar decision can cause in our region growth of a tuberculosis. Our fears were recognized reasonable and the question on closing prison is postponed.

10.Now, due to efforts of the ungovernmental organizations working in the field of protection of the rights condemned, the Government of Kazakhstan considers a question on transfer of a prison medical service to civil public health services, that will ensure condemned equal access to medical aid.

### Do you agree to this Completion Report being published on the Stop TB Partnership website?



no

#### Name of Organization: Общественное объединение "Committee on Monitoring of Penal Reforms and Human Rights"

#### 3.1 Summary Table

- Please read the document 'guidance for CFCS applicants' before completing this table
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- Outcomes are not what you do, but what changes for the people or groups you serve. They are measurable changes in health indicators, health care services, or policies. Outcomes should always be measured with indicators that describe your outcome in numerical terms (e.g. the number of people who go for testing, the % of patients who default, etc).
- Outcomes should be measured before the activity (baseline outcome indicator) and after (outcome achieved).
- Your planned output must use the same indicator as your achieved output. Similarly, the outcome should be measured using the same indicator both before (i.e. at baseline) and after (outcome achieved) the activity takes place.
- Your targets (output and outcome) are what you hope to achieve. Your targets are then compared to what you actually achieved.

Objective	Activity	Planned Output	Achieved Output	Duration	Outcome indicator at baseline (Before activity)	Outcome Indicator at completion (after activity)
Decrease of a tuberculosis among the prison population (personnel and condemned)	<ol> <li>Enlightening activity through:         <ul> <li>a) Training condemned and employees on questions TB on Trainings</li> </ul> </li> </ol>	To lead 30 trainings, where will take part 900 men	30 trainings, 900 participants are carried out	Since September, 2010 - July 2011	<b>Indicator 3:</b> The lists of the participants of trainings <b>Indicator 5:</b> Parameter of distribution of a tuberculosis	Indicator 3: Presence 30 lists of the participants of a training Indicator 5: For 2 - e half-year 2010 parameters 767, 16, For 12 months 2010 - 726 cases on 100 000 population. For 6 months 2011 parameters 472.
	6) Distribution of an information material on preventive maintenance of a tuberculosis	To let out and to distribute 3000 booklets, 300 posters	Is issued and 3000 booklets, 300 posters are distributed		<b>Indicator 4:</b> Insufficient quantity in inhabited premises, in rooms of appointments, in chambers in 5 establishments of	<b>Indicator 4:</b> Presence in all premises 5 prisons of the booklets and posters on preventive 8 maintenance and

Objective	Activity	Planned Output	Achieved Output	Duration	Outcome indicator at baseline (Before activity)	Outcome Indicator at completion (after activity)
					the booklets and posters on preventive maintenance and treatment of a tuberculosis	tuberculosis
	2. Realization of monitoring of prison establishments	To make 20 visits to prisons	21 visits	Since August 2010 till June 2011	Monitoring of each prison 1 time per one quarter	In each prison the monitoring is carried out 4 times during the project with a regularity 1 time per 3 months. In isolator 5 monitoring are carried out.
	3. Information work with the patients TB on continuity Treatments after an output from prison	Consultation of the patients TB before an exit from prison. To lead the analysis and to receive the information on statement on the account in Regional anti-tuberculosis dispensary of the patients TB, exempted from prisons.	From 300 consulted patients 40 patients were released. The analysis of a capture on the account of the patients released from establishments of the Pavlodar area for 2010 and for 6 months by 2011 is carried out		<b>Indicator 7:</b> 85,7 % of the patients is put on the account in 2010. With the uncompleted treatment have continued treatment after an output from prison 92, 9 %.	<b>Indicator 7:</b> For 6 months 2011 is put on the account of the patients from prisons of the Pavlodar area - 87, 5%. 90 % of the patients with the uncompleted treatment have continued treatment after an exit from prison on a residence.
2. Protection of health of the population of the	Individual work with the patients TB on increase of motivation	To consult 300 patients TB	300 patients TB are consulted	Since August 2010 till Jules 2011	<b>Indicator 6:</b> The information of civil public health	<b>Indicator 6:</b> On results 6 months of 2011 the parameter of

Objective	Activity	Planned Output	Achieved Output	Duration	Outcome indicator at baseline (Before activity)	Outcome Indicator at completion (after activity)
Pavlodar region	to end of treatment for decrease of cases of the steady forms of a tuberculosis				services on a situation with a tuberculosis in area. On results 2010 parameters of a tuberculosis on the Pavlodar area has made 98, 0 on 100 thousand population, for 1 half-year of 2010 - 49, 1. <b>Indicator 8:</b> The lists of the patients, of which has received an advice	a tuberculosis on the Pavlodar area has made 46, 2 on 100 thousand population <b>Indicator 8:</b> Presence of the lists of the patients, of which has received an advice <b>Indicator 9:</b> Presence of the stitch - in a medical card of the patient who has received an advice. In all medical cards the stitches - in on what questions are enclosed the consultation is carried out.
3. To pay attention on the part of the state and society to problems of prison establishments.	Realization of information campaign. Illumination in mass media of problems of prison establishments rendering influence on health, problems of the patients by a tuberculosis in prisons and persons, released from places of deprivation of freedom with the diagnosis a tuberculosis	12 publications in mass media. Realization of a round table	14 publications 1 round table	August 2010 November 2010 December 2010 January 2011 March 2011 April 2011 May 2011		Indicator 10: 2 clauses in a magazine « Execution of punishments » (Circulation 6200 copies), 1 clause in the collection of the reports for 2010. Penal Reform International - region of distribution Republic of Kazakhstan, 1 clause in a magazine «Cooperation», 3 information bulletins

Objective	Activity	Planned Output	Achieved Output	Duration	Outcome indicator at baseline (Before activity)	Outcome Indicator at completion (after activity)
						(region of distribution the Pavlodar area), 1 publication in the republican newspaper « the Kazakhstan truth », circulation 120 000, 6 publications in the regional newspapers «Version», « New time », « Our life », circulation 10200, 8000,1620 copies.

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## **3.2** Discuss 2 to 3 of the most important outcome(s) of the grant. These may be expected or unexpected outcomes.

The most important result of design activity - decrease of a parameter of a tuberculosis in prisons of the Pavlodar area - first half-year of 2010 - 686,2, in the second half-year - 767, 16, in the first half-year of 2011 - 472, 2. The parameters TB in the Pavlodar region - in the first half-year of 2010 - 49, 1, in the first half-year 2011 - 46, 2 were improved.

Percent of the patients TB has grown which have risen on the account after an output from prison and have continued treatment: in 2010 - 85,7 %, in 2011 - 87, 5 %.

The risk of distribution of a tuberculosis among civilians has decreased. Despite of it, the problem of a tuberculosis in prisons is kept. In prison system the parameter of a tuberculosis almost in 10 times is higher, than in a civil society

## **3.3** Does this grant have an advocacy component? If so, how does this grant contribute to a broader advocacy plan that your organization is following. (depending on the grant it may not be applicable to answer)

Project - enlightening and information. The organization used in the work the program STOP TB, its basic components.

# 3.4 Did the project encourage community members to come together to address TB or another health issue? These are not the planned activities in the grant proposal; these are activities that were carried out <u>by community members</u> after benefiting from your project.

Condemned and personnel of prison establishments at meeting with the friends and relatives are divided by the knowledge on a tuberculosis, that promotes increase of awareness of the population and preventive maintenance of a tuberculosis..

## 3.5 How did the gap/challenge/policy issue originally described in the application form (funding proposal question 1: introduction) change?

The questions of financing were carried out according to the application.

#### 3.6 How is the organization going to sustain the activities started with the grant?

The organization will continue activity on preventive maintenance of a tuberculosis in prison establishments

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**4. Results: Only complete the indicators that are appropriate to the project.** You may add more indicators as required (add indicators that are appropriate for the project).

Results	Total numbers:
Approximate number of beneficiaries reached in person: (e.g. small awareness raising mtgs, house-to-house visits, etc.)	Condemned about 5000, employees about 500, relatives and visitors of prisons about 1000, population of region 300 000 xx
Approx. number of beneficiaries reached through other means: (e.g. radio, media, public events, large meetings)	300 000
Approx. number of people that received printed information about TB:	160 000
Number of people affected by TB that were involved in xxxx	1000
Number of communities under-serviced by health sector are now serviced	The persons without the certain residence
Number of plans/law/policy dialogue meetings held with decision makers	1 round table, 2 meetings with a management of Department of prison system
Number of plans/laws/policies that have been accepted or approved	Our recommendations are accepted in attention to postpone the decision of a question on closing prison for the patients by tuberculosis.
Number of institutions that the organization collaborated with during this grant	Department of prison system, regional ant tubercular dispensary, administration 5 prison establishments, the journalists 3 regional and 1 central newspapers
Number of referred cases:	-
Number of those resulting in TB diagnose:	-
Number of defaulters traced:	-

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e.g. Number of people supported through a community mechanism:	-
e.g. Number of cases diagnosed with MDR-TB:	-
e.g. Number of HIV patients tested for TB:	-

## 5. Include 1 or 2 individual success stories from the grant. Please use the 'information gathering for success stories' found online at:

The most important result of design activity - decrease of a parameter of a tuberculosis in prisons of the Pavlodar area - first half-year of 2010 - 686,2, in the second half-year - 767, 16, in the first half-year of 2011 - 472, 2. The parameters TB in the Pavlodar region - in the first half-year of 2010 - 49, 1, in the first half-year 2011 - 46, 2 were improved.

Percent of the patients TB has grown which have risen on the account after an output from prison and have continued treatment: in 2010 - 85,7 %, in 2011 - 87, 5 %.

http://www.stoptb.org/global/awards/cfcs/bestpractice.asp

## 6. Please complete the 'CFCS Financial Report Form' (Annex I) and submit a detailed Financial Report.

#### ANNEX I CFCS Financial Report Form

#### Part I: Funding Status

Recipient Organization Name and complet address		Public Association "Committee on Monitoring of Penal Reforms and Human Rights"				
	140005 Republic of Toraigyrov str. 6, o Telephone No(s): 8 Fax No: 8(718)2 6	f. 63 7014251588	avlodar			
	Email address: : <u>k</u>	ovlyagina@land.	ru			
Total grant approved (US	5\$) <b>17 596</b>					
Grant Period from	01.08.2010 (DD/MM	l/YYYY) to	<u>31.07.2011</u> (DD/MM/YYYY)			
Period covered by this financial report	<u>01.08.2010 (</u> DD/M	M/YYYY) to	<u>31.07.2011 (DD/MM/YYYY)</u>			

#### Name of Organization: Общественное объединение "Committee on Monitoring of Penal Reforms and Human Rights"

Funds status	Date received	Amount in US\$
1 <sup>st</sup> disbursement	8 778,00	27.07.2010
2 <sup>nd</sup> disbursement	7 018,40	05.05.2011
3 <sup>rd</sup> disbursement		
Total Funds received (sum of Tranches received as of the date of this report) (A):	15 796,40	
Grant Awarded (C):	- 1 799,60	
Amount Spent* B:	17 596	
Unspent funds (A-B): Undisbursed funds (A-C):	0	

Certified by<sup>+</sup>:

Signature Name Kovlyagina Svetlana Title president

Spent means cash that has been paid out from the bank account into which grant money is being received. Certified by the Head of the Organization receiving funds

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Name of Organization: Общественное объединение "Committee on Monitoring of Penal Reforms and Human Rights"

#### Part II: Expenditure Status by Activities

**Expenditure by budget line** (please provide the same <u>detailed</u> tasks or budget lines and approved budget as per your approved proposal)

Task (budget line)	Approved budget to be spent in US\$ (A)	Amount allocated <sup>3</sup> by Grantee from funds received to date, in US\$ (B)	Actual expenditure in US\$ (C)	Variance in US\$ (B-C)	Comment
<b>1.</b> Activities (itemized as per approved budget)					
1.Administrative charges					
<b>1.1.</b> Payment of the coordinator of the project	2000	1800	1945,95	-145,95	
<b>1.2.</b> Payment office	600	540	834,90	-294,9	
<b>1.3.</b> Means of the communications (phone)	480	432	352,52	79,48	
<b>1.4.</b> The writing goods	240	216	234,42	-18,42	
2. Charges on design actions					
2.1. Carrying out of trainings					
2.1.1. The fee to trainers	4200	3780	4155,58	-375,58	
<b>2.1.2.</b> Purchase of the writing goods - the handle, a writing-book for participants of training	900	810	804,69	5,31	
<b>2.1.3.</b> Account materials for realization of trainings	1060	954	1230,12	-276,12	

<sup>&</sup>lt;sup>3</sup> Distribution of funds received by activity planned in the first half of the grant duration

<b>314</b> Durchage of mineral	300	270	204 71	6E 20	
<b>2.1.4.</b> Purchase of mineral	300	270	204,71	65,29	
water for participants					
	600	F 40	F02.12	42.42	
2.1.5. Transport charges	600	540	582,12	-42,12	
2.2. Carrying out of					
consultations					
<b>2.2.1.</b> The fee of the	3000	2700	3045,04	-345,04	
involved expert					
2.2.2.Transport charges	300	270	273,29	-3,29	
2.3. Carrying out of					
monitoring					
<b>2.3.1.</b> Payment of the	1000	900	1074,72	-174,72	
involved expert					
2.3.2. Transport charges	400	360	307,47	52,53	
2.3.3. Account materials for	140	126	141,52	-15,52	
realization of monitoring			,		
2.4 Release of an					
information material					
<b>2.4.1.</b> Development of the	100	90	0	90	
booklet, poster	100	50	5	50	
<b>2.4.2.</b> The edition of the	1000	900	1023,54	-123,54	
booklet (3000 pieces) and	1000	500	1025,54	-125,54	
poster (300 pieces) and					
<b>2.4.3.</b> Services of the	140	126	126.47	10.47	
	140	120	136,47	-10,47	
language					
2.5. Carrying out of the					
Round table					
<b>2.5.1</b> . Rent of a premise	140	126	136,47	-10,47	
<b>2.5.2.</b> Distributing material	70	63	71,80	-8,8	
<b>2.5.3.</b> Mineral water	10	9	0	9	
2.6. Services of the	10				
translator					
translator					

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<b>2.6.1.</b> Charges on translation into English language of a progress report	140	126	143,30	-17,3	
<b>2.6.2.</b> Charges on translation into English language of the final report	220	198	225,18	-27,18	
2.7. Services of external audit	500	450	614,13	-164,13	
2.8. Services of bank	56	10,40	58,07	-47,67	
Sub-Total	17 596	15 796,40	17 596	-1799,60	
<b>2</b> . Procurement (where applicable)					
Sub-Total	17 596	15 796,40	17 596	- 1 799, 60	The financial report is checked up by external audit. The expected sum third of Tranches under the grant 1 799,50
3. Total	17 596	15 796,40	17 596	- 1 799,60	

Certified by  $^{\Re}$ :

President Public Association "Committee on Monitoring of Penal Reforms and Human Rights" Svetlana Kovlyagina

Signature

 $<sup>^{\</sup>scriptscriptstyle \Re}$  Certified by the Head of the Organization receiving funds