

Funding Utilization Plan

Project Title : _____
Project Reference No. : _____
Implementing Department/Unit : _____
Funding Source : _____
Plan Period : From _____ to _____

1. Detailed Utilization Table

No.	Activity/Item	Description	Amount (USD)	Schedule	Remarks
1	Personnel	Project coordinator salary	5,000	Jan 2024 - Dec 2024	
2	Equipment	Laptops and accessories	3,500	Feb 2024	
3	Workshops	Training sessions for staff	2,000	Mar - Jun 2024	
4	Supplies	Stationery, printing	1,000	Throughout Period	
		Total	11,500		

2. Justification & Remarks

Briefly describe the justification for each major item/activity listed above, outlining the necessity and expected outcomes.

- Personnel:** Essential for project management and implementation.
- Equipment:** Supports operational efficiency and output quality.
- Workshops:** Ensures capacity building of staff and stakeholders.
- Supplies:** Covers essential consumables for day-to-day activities.

3. Certification & Approval

Prepared by:

Name:

Position:

Date:

Signature:

Reviewed by:

Name:

Position:

Date:

Signature:

Approved by:

Name:

Position:

Date:

Signature:

Important Notes:

- Ensure all requested amounts align with the approved project budget.
- Provide clear and concise justifications for each budget line.
- Attach relevant supporting documents where necessary.
- Obtain all required signatures before submission.
- Any revisions to the plan must be resubmitted for approval.