

# NON-INSURED HEALTH BENEFITS (NIHB) PROGRAM MANAGEMENT AND SUPPORT ANNUAL FINANCIAL REPORT - NR

**DCI number / Fiscal year:** HC-P068 (2024-2025)

**NOTE:** This document is a representation of the reporting requirements for DCI HC-P068. Where applicable, reporting templates, guides and data collection tools that will assist you to complete your reporting requirements will be provided by your regional office. Please contact your [ISC-FNIHB regional office](#) if you have not received a copy of the documents, if you have questions, or require assistance.

**Program reporting requirements:**

Complete template *NIHB PM&S- B* or other approved alternative.

**NIHB PM&S-B – FINANCIAL PROGRESS REPORT**

Program management and support

	Apr.	May	Jun.	Jul.	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	TOTAL
<b>Salaries</b>													
<i>Salaries should be listed by individual salary</i>													
Meetings/Travel													
Communication													
O&M													