

ACT Alliance

Maintenance Audit 1 - Report - 2025/03/31

1. General information and audit activities

Role / name of auditor(s)	Lead Auditor, Ivan Kent	
Audit cycle	Third Cycle	
Opening Meeting	Date / number of participants	Any substantive issues arising
	10 February 2025 / 27 participants	None
Closing Meeting	27 February 2025 / 22 participants	None
Interviews	Position / level of interviewees	Number
	Management	4
	Staff	1

2. Actions and progress of organisation

2.1 Significant change or improvement since the previous audit

The ACT Alliance Secretariat has taken a number of significant steps to address the gaps identified in the 2023 Renewal Audit. A set of short- and long-term actions for each minor CAR has been identified in a CHS Compliance Action Plan, to align with the current maintenance audit and the expected renewal audit in 2027. Progress has been monitored by a Steering Group, with engagement by the General Secretary and the Core Management Team, especially for the delivery of policy actions.

Initiatives already undertaken with a significant bearing on adherence to the CHS include: revisions to the Humanitarian Operations Manual with updates to ACT ALERT and RRF planning, monitoring and reporting templates (aimed at ACT members); a set of Humanitarian Monitoring and Evaluation Mandatory Guidelines and a Thematic PMEAL Manual (aimed at the ACT Secretariat); an Environment and Climate Change Manual and action plan; updated policies (Code of Conduct, Code of Good Practice and Safeguarding Policy) and training modules; recruitment to new/revised posts in the Secretariat, and revisions to the Quality and Accountability Framework.

The new and revised policies lay the foundation for addressing several of the minor CARs by setting out clearer commitments, roles and responsibilities, and acting as a reference for monitoring and support to members with regard to the CHS.

Many of the policies and manuals are yet to be fully rolled out, promoted and tested. This will be an important next step with regard to the application of the standard.

Progress against Minor CAR 8.4 has been given additional attention in this audit in line with a request by HQAI's Advisory and Complaint Board. The 2023 Renewal Audit noted that 'High operational demands and change processes are stretching the capacity of the Secretariat to manage the effective operation of its humanitarian mechanism (Appeal and RRF) in compliance with the CHS'. The 2023 Renewal Audit found that several contributing factors including high workloads, incomplete programme guidance, and poorly functioning systems were compromising the ability of the Secretariat to meet the standard across a number of indicators.

This Maintenance Audit found that the Secretariat has put in place a number of actions to address the Minor CAR 8.4. Some of these are already having effect on workloads, others are yet to be fully rolled out. A further set of strategic initiatives are planned for the period leading up to the next Renewal Audit in 2027.

- Several staff positions have been created, expanded or filled, notably for the roles of Governance and Membership Co-ordinator, a Humanitarian Finance Co-ordinator, and a Human Resources Officer. Further staff support has been allocated (on a pilot basis) to support PMER within the Humanitarian team. These roles have filled important gaps and are addressing some workload issues especially in terms of administrative support to the humanitarian function. In addition, the online flexitime recording tool has now been embedded into human resource systems and is being used by managers to assess and manage workloads. Some pinch-points in the humanitarian team have been addressed with additional support, and 360 degree staff appraisals have been introduced. The recent staff survey should provide an update on staff wellbeing across the Secretariat. This will also feed into an upcoming Organisational Review, which includes an assessment of the current Humanitarian team structure. This could provide recommendations to better distribute and balance workloads to better support RRFs and appeals. Given funding constraints, there is also a possibility that the recent gains made in capacity support could be put at risk.
- The further development and release of the Humanitarian Monitoring and Evaluation Guidelines and the Thematic PMEAL Manual have clarified monitoring tasks and the expectations of the humanitarian team, and the function of other actors within the ACT humanitarian response, particularly members and forums. These tools, in particular the Humanitarian Operations Manual, are yet to be finalised (some online elements are missing, and revisions are still pending). They have not yet been fully promoted or tested to see if the Secretariat and other actors are able to fully meet the expectations described.
- In order to address capacity constraints at a strategic level, and to monitor the application of the CHS, the Secretariat has proposed a revision of the Quality and Accountability Framework. There is also a plan to digitalise policy compliance and project management functions. The revised Quality and Accountability framework rationalises the number of policies that all ACT members need to comply with, with a second set of policies to be applied to operational/humanitarian members. This is intended to simplify monitoring and support to member compliance with the CHS. The revised Q and A framework has not yet been approved by the Governing Body. The due-diligence initiative is intended to streamline processes for managing quality and accountability, building on the Secretariat's support to members for CHS self-assessment, and enabling humanitarian due-diligence passporting. This initiative is yet to be fully designed or rolled out, although a decision has already been made that members applying to the RRF must have completed some form of due diligence assessment. The digitalisation project is also expected to streamline the monitoring of member adherence to the CHS. It will take time for these initiatives to be completed, promoted and embedded across the Alliance.

In summary, this audit found strong action taken to move forward on the CARs identified in the 2023 Renewal Audit, with the exception of 2023-3.6 and 2023-6.6. The gaps found during this audit are outlined in the table below. The revised Humanitarian Operations Manual and Monitoring Guidelines will provide an important mechanism to monitor and prevent the re-appearance of non-conformities, once these are rolled out and followed – as long as capacity exists within the Secretariat to do so. There has also been deliberation by the ACT Secretariat to tackle structural issues with regard to monitoring and support of members, e.g. through the revision of the Q & A Framework and due diligence project.

The application of the recent policy developments have not yet been tested in practice. This will happen at the next Renewal Audit (2027) when sufficient objective evidence can be collected from multiple levels (Secretariat, members and crisis-affected communities) to assess conformity with the standard. A second Maintenance Audit (MA2) will provide an update on progress, and help to identify risk areas for the transition to the CHS:2024 standard. The MA2 will also be used to clarify an appropriate scope and mechanism to apply in the next Renewal Audit.

2.2 Summary on corrective actions

Corrective Action Requests (CAR)	Type and resolution timeframe	Progress made to address the CAR and in response to the findings of the indicator	Evidence
2023-2.3: The ACT Alliance Secretariat does not systematically support members to refer unmet needs to	Minor by 2027 (RA)	The ACT Secretariat has taken steps to address the CAR including: <ul style="list-style-type: none"> • The Humanitarian Operations Manual (HOM) has been revised and made available to members on the 	517, 518, 551, 553, 556

organisations with relevant expertise.		<p>ACT Alliance website. This includes a statement about the need for referral mechanisms.</p> <ul style="list-style-type: none"> A set of mandatory Humanitarian Monitoring and Evaluation Guidelines have been uploaded to the ACT Alliance website. These clarify the role of ACT HPOs in providing monitoring and guidance to members and state that their work should be budgeted in Appeals and RRFs. The annexes are pending development. The HOP Monitoring Template includes a check on referral mechanisms <p>The monitoring reports from a recent ACT Appeal affirms that referral mechanisms are in place.</p> <p>Some actions remain: the Appeal Guidance and the RRF Guidance documents are not yet available on the HOM webpage. The Annexes for the Monitoring Guidelines have yet to be developed. The guidelines and templates are yet to be fully tested.</p>	<p>HOM webpage¹</p> <p>Staff interviews</p>
2021-2.5: PMER guidance is not yet formalised to adapt programmes and address poor performance on a systematic level, that includes mechanisms for member outcome reporting.	Minor by 2027 (RA)	<p>Good progress has been made to address the CAR:</p> <ul style="list-style-type: none"> The Thematic Programme PMEAL Manual has been completed and formalised, setting out the roles of ACT Secretariat staff and ACT members at each stage of the programme cycle. The PMEAL Manual defines a financial threshold for triggering specific monitoring processes and includes guidelines for member outcome reporting. Member outcome reporting is also covered in detail in the HOM and ACT Humanitarian Monitoring and Evaluation Guidelines along with revised templates. The process for undertaking a 3-month revision for each Appeal has been formalised. <p>The processes described within the PMEAL Manual and HOM have yet to be fully tested for adapting programmes and addressing poor performance in ACT Appeals and RRFs. The sections in the HOM relating to the 3-month revision (including finance) have not been uploaded.</p>	<p>517, 518, 519, 556</p> <p>Staff interviews</p>
2023–2.6: The ACT Alliance Secretariat does not allocate capacity to monitor member compliance with, and the quality of implementation of, mandatory policies (including on PSEA).	Minor by 2027 (RA)	<p>The ACT Secretariat has taken steps to address the CAR including:</p> <ul style="list-style-type: none"> a full-time Governance and Membership Co-ordinator post has been established to support member compliance with mandatory policies (including on PSEA). The position has been recruited and reports directly to the General Secretary. Strategic support for the MEAL function within the Secretariat is being provided for 8 months in 2025 through the creation of a 0.5 FTE MEAL Officer position within the Humanitarian team. Increased support has been provided to support staff in regions with high levels of humanitarian work. The Humanitarian Team travel plans for 2024 show support to ongoing ACT appeals and RRFs. <p>Some actions remain including:</p> <ul style="list-style-type: none"> An organisational review which will include analysis of the workload and structure of the Humanitarian Team. 	<p>509, 510, 511, 540, 547, 549</p> <p>Staff interviews</p>

¹ <https://actalliance.org/humanitarian-operations-manual/>

		<ul style="list-style-type: none"> A proposed revision of the ACT Quality and Accountability Framework which identifies a reduced set of core mandatory policies for all ACT members, to be assessed via a digital platform. A new framework for member and implementing partner due diligence, taking into account ACT's experience in supporting CHS-self assessments and processes for humanitarian DD passporting. 	
2023-2.7: Policy commitments do not ensure systematic monitoring and evaluation, or adaptation based on evidence from these processes, or timely decision-making with resources allocated accordingly.	Minor by 2027 (RA)	<p>Good progress has been made to address the CAR:</p> <ul style="list-style-type: none"> The revised HOM, new Humanitarian Monitoring Guidelines and Programme PMEAL Manual describe the roles, responsibilities and processes regarding humanitarian action. The HOM identifies processes and thresholds for timely decision-making regarding the activation of a response and for transferring funds following approval. <p>Some actions remain:</p> <ul style="list-style-type: none"> The policy commitments in the HOM have yet to be fully socialised. The Secretariat further intends to develop an online system to capture and share findings from monitoring visits as part of a digitalisation project. 	517, 518, 519, 556 HOM webpage Staff Interviews
2023-3.6: The ACT Alliance Secretariat does not systematically support members to identify and act upon potential or actual negative effects related to livelihoods, the economy or the environment.	Minor by 2027 (RA)	<p>Actions to address this minor CAR are mentioned in the CHS Compliance Action Plan. A commitment to 'Do No Harm' is evident in several key documents. However, this audit did not find evidence of major progress specifically relating to the wording in this CAR:</p> <ul style="list-style-type: none"> The current Appeal and RRF templates and the Humanitarian Monitoring Checklist do not mention the identification of potential or actual negative effects related to the environment. Sample project documents from a recent appeal do not show evidence of actions to identify or act on negative effects. 	517, 518, 553, 556 HOM webpage
2021-4.1: The ACT Alliance Secretariat does not adequately support members to provide communities with information on the expected behaviours of their staff.	Minor by 2027 (RA)	<p>The ACT Secretariat has taken steps to address this CAR including:</p> <ul style="list-style-type: none"> Revised versions of the ACT Code of Conduct and the ACT Code of Good Practice have been developed and approved by the ACT Governing Board. The revised policies state the need to share commitments on behaviour regarding PSEA with communities. The revised HOM also states that organisations must proactively communicate expected behaviours of humanitarian workers, including commitments to preventing sexual exploitation, abuse, and harassment (SEAH). The need to make communities aware of the expected behaviour of staff is included in the HOP monitoring checklist. Evidence of training delivered for a humanitarian project inception meeting states the requirement for members to communicate the Code of Conduct and refers to the ACT Guide on Communicating with Communities. 	521, 522, 520, 553, 556 HOM webpage Staff interviews

		<p>However, the expectation for members to communicate expected behaviour of staff is not stated in the current templates for the Appeal or RRF.</p> <p>Some further actions remain:</p> <ul style="list-style-type: none"> The revised Code of Conduct and Code of Good Practice have not yet been fully promoted and socialised among members, pending the approval of the complete set of 'core policies' by the Governing Body. A revision of the e-course on the revised ACT Code of Conduct is planned to include information for members to inform communities on expected behaviour. 	
2023-4.3: The ACT Alliance Secretariat does not monitor or require reporting on members' commitments on inclusivity, representation, and levels of participation at all stages of the work.	Minor by 2027 (RA)	<p>The ACT Secretariat has taken steps to address the CAR including:</p> <p>References to inclusion are now found within the following HOM monitoring tools:</p> <ul style="list-style-type: none"> Rapid Needs Assessment Template Appeal Template Monitoring Checklist <p>However, the current RRF Proposal and Reporting Templates do not require information on inclusion (e.g. for women or people with disabilities)</p> <p>The audit did not test how members are using these tools or how they are being monitored.</p>	<p>518</p> <p>HOM webpage</p>
2023-5.4: The ACT Alliance Secretariat has no systematic way to ensure that complaints handling processes are documented and in place.	Minor by 2027 (RA)	<p>The ACT Secretariat's CHS Audit Compliance Action Plan states that 'a standardised system to ensure documentation of complaints handling processes by members will be completed by Dec 2025'. Some steps have been taken to date:</p> <ul style="list-style-type: none"> The HOM has been revised and uploaded to the ACT Website. Reference to Complaints Mechanisms are found in the Appeal Template, the RRF Proposal template (but not the report) and the HPO monitoring checklist The ACT Secretariat continues to support capacity of members on complaints handling including through a revised Fabo course. <p>A review of how these tools are monitored to ensure processes are in place was not assessed in this audit.</p> <p>Some further actions remain:</p> <ul style="list-style-type: none"> The revised Q&A framework (pending approval by the Governing Board) has recommended that all ACT members adhere to the 2021 Complaints Policy and a project to digitalise evidence of ACT member compliance with Core Policies is planned. 	<p>507, 510, 518, 544, 545, 546</p> <p>HOM webpage</p> <p>Staff Interviews</p>
2023-6.6: The ACT Alliance Secretariat does not ensure members include accountability requirements to local	Minor by 2027 (RA)	<p>The ACT Secretariat CHS Compliance Action Plan states that a revision of the 'subgrant agreement templates' will take place by November 2025.</p> <p>This had not taken place by the time of this audit. There are questions whether this measure is feasible.</p>	<p>518 (overview & policies)</p> <p>HOM webpage</p>

partners in subgrant agreements.		Further, while the paper on Roles and Responsibilities in the HOM note that implementing partners must comply with the Code of Conduct among other policies, it does not stipulate that ACT Requesting Members are responsible for ensuring that CHS standard is cascaded to implementing partners.	Staff Interviews
2023-8.4: High operational demands and change processes are stretching the capacity of the Secretariat to manage the effective operation of its humanitarian mechanism (Appeal and RRF) in compliance with the CHS.	Minor by 2027 (RA)	<p>Good progress has been made to address the CAR:</p> <p>Posts have been created and/or filled to address pinch-points, including: the Governance and Membership Coordinator, the Humanitarian Finance Co-ordinator, the Human Resources Officer, plus additional support for humanitarian PMEAL on a pilot basis.</p> <ul style="list-style-type: none"> • An online flexi-time recording tool (Timmi Temps) has been rolled out, and is being used by managers to better identify and address high-workloads. • The Humanitarian Operations Manual and the PMER guidelines have been revised, clarifying the expectations of the Secretariat staff with regard to humanitarian action. • A mental health and wellness survey has been undertaken among staff <p>Some actions remain:</p> <ul style="list-style-type: none"> • The HOM and associated tools which clarify roles and responsibilities, including the checklist for monitoring visits are yet to be fully tested. • An organisational review is planned, which will consider a more efficient structure for the Secretariat, and include an assessment of the humanitarian team. • A digitalisation project to establish a platform for monitoring reports is planned. 	<p>507, 508, 511, 524, 526, 548, 550</p> <p>Staff Interviews</p>
2023-9.1: ACT Alliance funding processes inhibit the efficient use of resources, with requesting members unable to balance quality, cost and timeliness in responses that do not reach Appeal targets.	Minor by 2027 (RA)	<p>The ACT Secretariat has taken steps to address the CAR including:</p> <ul style="list-style-type: none"> • The HOM has been published on the ACT website and includes processes and timings for decision-making. • A Humanitarian Finance Co-ordinator has been hired to strengthen capacity in providing financial information to members. • A process has been introduced to make revise each Appeal 3-months after launch to better align the programme budget with the funding reality. <p>Some actions remain:</p> <ul style="list-style-type: none"> • The HOM has yet to be fully promoted across the Alliance. • The financial system used for communicating balances for Appeals does not provide sufficiently timely information • The section in the HOM on Appeals revision including finance has not yet been uploaded. 	<p>518, 548</p> <p>HOM webpage</p> <p>Staff Interviews</p>
2021-9.4: The ACT Alliance Secretariat does not provide guidance or support staff or members to assess, monitor and	Minor by 2027 (RA)	<p>The ACT Secretariat has taken steps to address the CAR including:</p> <ul style="list-style-type: none"> • An Environment and Climate Change Manual, which contains guidance to staff on reducing the environmental impact of Secretariat operations has 	<p>518, 528, 554, 555, 556</p> <p>HOM webpage</p>

prevent the potential impact on the environment when using local and natural resources.		<p>been completed and approved by the CMT in January 2025.</p> <ul style="list-style-type: none"> An Environment and Climate Manual Action Plan has been drafted to set milestones and targets for action up to 2027. However, this has not yet been finalised or approved. <p>Some actions remain:</p> <ul style="list-style-type: none"> The manual is intended also to be shared with ACT members, but a mechanism for doing so is yet to be identified. Consideration of environmental impact is absent from the Appeal, RRF and HOP monitoring templates within the HOM. 	Staff interviews
2023-9.6: The ACT Alliance Secretariat does not fulfil organisational responsibilities relating to resource management.	Minor by 2027 (RA)	<p>The ACT Secretariat has taken a significant step to address this CAR:</p> <ul style="list-style-type: none"> A 'Resource Mobilisation and Donor Screening Guideline' has been developed containing a checklist and process for guiding decision-making for ethical fundraising. <p>The audit did not test how this has been used.</p>	527 Staff interviews

3. Summary of non-conformities


Corrective Action Requests (CAR)	Type	Status	Resolution timeframe
2023-2.3: The ACT Alliance Secretariat does not systematically support members to refer unmet needs to organisations with relevant expertise.	Minor	Open	by 2027 (RA)
2021-2.5: PMER guidance is not yet formalised to adapt programmes and address poor performance on a systematic level, that includes mechanisms for member outcome reporting.	Minor	Open	by 2027 (RA)
2023-2.6: The ACT Alliance Secretariat does not allocate capacity to monitor member compliance with, and the quality of implementation of, mandatory policies (including on PSEA).	Minor	Open	by 2027 (RA)
2023-2.7: Policy commitments do not ensure systematic monitoring and evaluation, or adaptation based on evidence from these processes, or timely decision-making with resources allocated accordingly.	Minor	Open	by 2027 (RA)
2023-3.6: The ACT Alliance Secretariat does not systematically support members to identify and act upon potential or actual negative effects related to livelihoods, the economy or the environment.	Minor	Open	by 2027 (RA)
2021-4.1: The ACT Alliance Secretariat does not adequately support members to provide communities with information on the expected behaviours of their staff.	Minor	Open	by 2027 (RA)
2023-4.3: The ACT Alliance Secretariat does not monitor or require reporting on members' commitments on inclusivity, representation, and levels of participation at all stages of the work.	Minor	Open	by 2027 (RA)
2023-5.4: The ACT Alliance Secretariat has no systematic way to ensure that complaints handling processes are documented and in place.	Minor	Open	by 2027 (RA)

2023-6.6: The ACT Alliance Secretariat does not ensure members include accountability requirements to local partners in subgrant agreements.	Minor	Open	by 2027 (RA)
2023-8.4: High operational demands and change processes are stretching the capacity of the Secretariat to manage the effective operation of its humanitarian mechanism (Appeal and RRF) in compliance with the CHS.	Minor	Open	by 2027 (RA)
2023-9.1: ACT Alliance funding processes inhibit the efficient use of resources, with requesting members unable to balance quality, cost and timeliness in responses that do not reach Appeal targets.	Minor	Open	by 2027 (RA)
2021-9.4: The ACT Alliance Secretariat does not provide guidance or support staff or members to assess, monitor and prevent the potential impact on the environment when using local and natural resources.	Minor	Open	by 2027 (RA)
2023-9.6: The ACT Alliance Secretariat does not fulfil organisational responsibilities relating to resource management.	Minor	Open	by 2027 (RA)
Total Number of open CARs		13	

4. Claims Review

Claims Review conducted	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up required	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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5. Lead auditor recommendation

In my opinion, The ACT Alliance Secretariat has demonstrated that it is taking necessary steps to address the CARs identified in the previous audits and continues to conform with the requirements of the Core Humanitarian Standard on Quality and Accountability. I recommend maintenance of certification.	
Name and signature of lead auditor:  Ivan Kent	Date and place: 06 March 2025 Canterbury, UK

6. HQAI decision

<input checked="" type="checkbox"/> Certificate maintained <input type="checkbox"/> Certificate suspended	<input type="checkbox"/> Certificate reinstated <input type="checkbox"/> Certificate withdrawn
Surveillance audit before: 2026/03/31	
Name and signature of HQAI Executive Director: Désirée Walter 	Date and place: Geneva, 31 March 2025

7. Acknowledgement of the report by the organisation

Space reserved for the organisation	
Any reservations regarding the audit findings and/or any remarks regarding the behaviour of the HQAI audit team: If yes, please give details:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Acknowledgement and Acceptance of Findings: I acknowledge and understand the findings of the audit I accept the findings of the audit	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Name and signature of the organisation's representative: 	Date and place: Geneva 30.04.2025

Appeal

In case of disagreement with the quality assurance decision, the organisation can appeal to HQAI within 14 workdays after being informed of the decision.

HQAI will transmit the case to the Chair of the Advisory and Complaint Board who will confirm that the basis for the appeal meets the appeals process requirements. The Chair will then constitute an appeal panel made of at least two experts who have no conflict of interest in the case in question. The panel will strive to come to a decision within 45 workdays.

The details of the Appeals Procedure can be found in document PRO049 – Appeals Procedure.

Annex 1: Explanation of the scoring scale*

Scores	Meaning: for all verification scheme options	Technical meaning for all independent verification and certification audits
0	Your organisation does not work towards applying the CHS commitment.	<p>Score 0: indicates a weakness that is so significant that the organisation is unable to meet the commitment. This leads to:</p> <ul style="list-style-type: none"> Independent verification: major weakness. Certification: major non-conformity, leading to a major corrective action request (CAR) – No certificate can be issued or immediate suspension of certificate.
1	Your organisation is making efforts towards applying this requirement, but these are not systematic.	<p>Score 1: indicates a weakness that does not immediately compromise the integrity of the commitment but requires to be corrected to ensure the organisation can continuously deliver against it. This leads to:</p> <ul style="list-style-type: none"> Independent verification: minor weakness. Certification: minor non-conformity, leading to a minor corrective action request (CAR).
2	Your organisation is making systematic efforts towards applying this requirement, but certain key points are still not addressed.	<p>Score 2: indicates an issue that deserves attention but does not currently compromise the conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> Independent verification and certification: observation.
3	Your organisation conforms to this requirement, and organisational systems ensure that it is met throughout the organisation and over time – the requirement is fulfilled.	<p>Score 3: indicates full conformity with the requirement. This leads to:</p> <ul style="list-style-type: none"> Independent verification and certification: conformity.
4	Your organisation's work goes beyond the intent of this requirement and demonstrates innovation. It is applied in an exemplary way across the organisation and organisational systems ensure high quality is maintained across the organisation and over time.	<p>Score 4: indicates an exemplary performance in the application of the requirement.</p>

* Scoring Scale from the CHSA Verification Scheme 2020







1_ACTA_MA1_Report_2025-03-31

Final Audit Report

2025-04-30

Created:	2025-04-29
By:	Rizwan Iqbal (rizwan.iqbal@actalliance.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAASmTpU8pmoKajBJlq5DB8FdBf3vnXvej2

"1_ACTA_MA1_Report_2025-03-31" History

-  Document created by Rizwan Iqbal (rizwan.iqbal@actalliance.org)
2025-04-29 - 3:14:28 PM GMT
-  Document emailed to Rudelmar Bueno de Faria (rudelmar.buenodefaria@actalliance.org) for signature
2025-04-29 - 3:14:36 PM GMT
-  Email sent to nancy.ette@actalliance.org bounced and could not be delivered
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-  Email viewed by Rudelmar Bueno de Faria (rudelmar.buenodefaria@actalliance.org)
2025-04-30 - 7:28:57 AM GMT
-  Document e-signed by Rudelmar Bueno de Faria (rudelmar.buenodefaria@actalliance.org)
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-  Agreement completed.
2025-04-30 - 7:32:35 AM GMT