PROGRAM GRANT AGREEMENT BETWEEN THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA ("Global Fund") AND THE UNITED NATIONS DEVELOPMENT PROGRAMME ("Principal Recipient")

ye.

2. Program Title: Tuberculosis Prevention in High Burden Areas, Islamic Republic of Iran 3. Grant Number: IRN-708-G03-T 3A. Modification Number and Date: 3 (Phase 2 Grant Agreement) 4. Program Starting Date: 01 5. Program Ending Date: 30 30 September 2013 5. Condition Precedent Terminal Date: 6B. Condition Precedent Terminal Date: 6C. Condition Precedent Terminal Date: 6D. Condition Precedent Terminal Date: 6E. Condition Precedent Terminal Date: 6F. Condition Precedent Terminal Date: 7. Grant Funds: Up to the amount of US\$ 18,957,412 (eighteen million, nine hundred fifty-seven thousand, four hundred twelve United States Dollars) 6F. Condition Precedent Terminal Date: 7. Grant Funds: up to the Amount of US\$ 18,957,412 (eighteen million, nine hundred fifty-seven thousand, four hundred twelve United States Dollars) 6F. Condition Precedent Terminal Date: 7. Grant Funds as indicated above will be committed by the Global Fund to the Principal Recipient in staggered terms as described in Section H of Annex A of this Agreement, involving a First Commitment of US\$ 16,044,881 (sixteen million fort four thousand eight hundred and twelve thoundred and twelve United States Dollars). 8. Program Coverage: HIV/AIDS X Tuberculosis Malaria HIV/AIDS/Tuberculosis 9. Information for Principal Recipient Bank Account into Which Grant Funds Will Be Disbursed: Beneficiary: UNDP Bank: JP Morgan Chase Af Alereici America Account Number: 0	1. Country: Islamic Republic o	f Iran		
A. Program Starting Date: 01 October 2008 S. Program Ending Date: 30 September 2013 6. Proposal Completion Date: 30 September 2013 6A. Condition Precedent Terminal Date: 6B. Condition Precedent Terminal Date: 6C. Condition Precedent Terminal Date: 6C. Condition Precedent Terminal Date: 6D. Condition Precedent Terminal Date: 6E. Condition Precedent Terminal Date: 6F. Condition Precedent Terminal Date: 7. Grant Funds: Up to the amount of US\$ 18,957,412 (eighteen million, nine hundred fifty-seven thousand, four hundred twelve United States Dollars) Grant Funds as indicated above will be committed by the Global Fund to the Principal Recipient in staggered terms as described in Section H of Annex A of this Agreement, involving a First Commitment of US\$ 16,044,881 (sixteen million forty four thousand eight hundred and eighty one United States Dollars) and a Second Commitment of US\$ 2,912,531 (two million nine hundred and twelve thousand five hundred and thirty one United States Dollars). 8. Program Coverage:	2. Program Title: Tuberculosis	Prevention in High Burd	len Areas, Islamic Re	epublic of Iran
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Date: Date: Date: GD. Condition Precedent Terminal Date: 6E. Condition Precedent Terminal Date: 6F. Condition Precedent Terminal Date: 7. Grant Funds: Up to the amount of US\$ 18,957,412 (eighteen million, nine hundred fifty-seven thousand, four hundred twelve United States Dollars) Grant Funds as indicated above will be committed by the Global Fund to the Principal Recipient in staggered terms as described in Section H of Annex A of this Agreement, involving a First Commitment of US\$ 16,044,881(sixteen million forty four thousand eight hundred and eighty one United States Dollars) and a Second Commitment of US\$ 2,912,531 (two million nine hundred and twelve thousand five hundred and thirty one United States Dollars). 8. Program Coverage:			ing Date: 30	
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as described in Section H of Annex A of this Agreement, involving a First Commitment of US\$ 16,044,881(sixteen million forty four thousand eight hundred and eighty one United States Dollars) and a Second Commitment of US\$ 2,912,531 (two million nine hundred and twelve thousand five hundred and thirty one United States Dollars). 8. Program Coverage:			(eighteen million, nir	he hundred fifty-seven thousand, four
 9. Information for Principal Recipient Bank Account into Which Grant Funds Will Be Disbursed: Beneficiary: UNDP Bank: JP Morgan Chase Address: 270 Park Avenue, 43rd Floor New York, NY, 10017 United States of America Account: UNDP Contributions Account Account: UNDP Contributions Account Account Number: 015002284 SWIFT Code: CHASUS33 ABA Number: 021000021 10. The fiscal year of the Principal Recipient runs from 1 January to 31 December 11. LFA: Iran Moshar Limited Address: No.45, 2nd Floor, Neshat St., Eajazi St. (Asef), Zafaranieh, Tehran, 19877, Iran Tel.: +98-21-2243 4249 Fax: +98-21-2243 4251 Attention: Mr. Rasoul Dorri 	as described in Section H of Ani million forty four thousand eigh 2,912,531 (two million nine hun	nex A of this Agreement, t hundred and eighty one dred and twelve thousand	involving a First Co United States Dollar	mmitment of US\$ 16,044,881(sixteen s) and a Second Commitment of US\$
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Bank:JP Morgan ChaseAddress:270 Park Avenue, 43rd Floor New York, NY, 10017 United States of AmericaAccount:UNDP Contributions AccountAccount Number:015002284SWIFT Code:CHASUS33 ABA Number:02100002110. The fiscal year of the Principal Recipient runs from 1 January to 31 December11.LFA: Iran Moshar Limited Address: No.45, 2nd Floor, Neshat St., Eajazi St. (Asef), Zafaranieh, Tehran, 19877, Iran Tel.: +98-21-2243 4249 Fax: +98-21-2243 4251 Attention: Mr. Rasoul Dorri	9. Information for Principal Re	cipient Bank Account int	to Which Grant Fund	s Will Be Disbursed:
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Attention: Mr. Rasoul Dorri				
	and here young and here's	orri		

12. Principal Recipient Additional Representative	13. Global Fund Additional Representative:
Name: Consuelo Vidal	Name: Jonathan Brown
Title: Resident Representative	Title: Acting Director of Country Programs
Address: No. 8, Shahrzad Blvd., Darrous, 1948773911,	Address : Chemin de Blandonnet 8
Iran	1214 Vernier, Switzerland
Tel: +98 21 2286 0691-4	Tel.: +41 58 791 1700
Fax: +98 21 2286 9547	Fax: +41 58 791 1701
E-mail: Consuelo.vidal@undp.org	C.M.9762028 U.L.C.1056-988442810/125636 Infl.2020944407

AMENDMENT TO

PROGRAM GRANT AGREEMENT (the "Grant Agreement")

BETWEEN

THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA (the "Global Fund")

AND

UNITED NATIONS DEVELOPMENT PROGRAMME (the "Principal Recipient")

WHEREAS,

- 1. the Global Fund entered into the Grant Agreement for Grant Number IRN-708-G03-T with the Principal Recipient on 16 September 2008 for the purpose of providing funds to implement a Tuberculosis program in the Islamic Republic Of Iran described more fully in the Grant Agreement as "Tuberculosis Prevention in High Burden Areas, Islamic Republic of Iran" (the "Program");
- 2. In accordance with Article 12 and 20 of the Standard Terms and Conditions of the Grant Agreement, the Grant Agreement was amended by Implementation Letters dated 16 November 2009 and 24 August 2010;
- Article 3.d of the Standard Terms and Conditions of the Grant Agreement states that "[u]nless the Global Fund agrees otherwise in writing, the Global Fund will not authorize disbursement of the Grant after the 'Program Ending Date' (specified in block 5 of the face sheet of this Agreement)";
- 4. The "Program Ending Date" specified in block 5 of the face sheet of the Grant Agreement is 30 September 2013; and
- 5. Subject to certain conditions, the Global Fund wishes to increase the amount of the Grant, to continue disbursement of funds under the Grant and to extend the Program Ending Date,

NOW, THEREFORE, in consideration of the mutual covenants and agreements contained herein and intending to be legally bound, the parties hereby agree to amend the Grant Agreement as follows:

- 1. The existing face sheet of the Grant Agreement is replaced by the face sheet attached hereto.
- 2. The Standard Terms and Conditions of the Grant Agreement are replaced with those attached hereto.

- 3. Annex A of the Grant Agreement (exclusive of any attachments that have formerly been attached to such Annex A) is replaced with the revised Annex A attached hereto entitled "Annex A: Program Implementation Abstract".
- 4. The document entitled "Performance Framework Year 3, 4 & 5: Indicators, Targets and Periods Covered" attached hereto is attached to Annex A of the Grant Agreement, as revised by this Amendment.
- 5. The document entitled "Summary Budget Year 3, 4 & 5" attached hereto is attached to Annex A of the Grant Agreement, as revised by this Amendment.

All other provisions of the Grant Agreement shall remain in full force and effect.

IN WITNESS WHEREOF, the parties have executed this Amendment on the date as stated below.

UNITED NATIONS DEVELOPMENT PROGRAMME

By:

Name: Consuelo Vidal

Title: Resident Representative

Date:_____

THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA

By:

Name: Prof. Michel Kazatchkine

Title: Executive Director

2011 Date:

ANNEX A to the PROGRAM GRANT AGREEMENT

Program Implementation Abstract

Country:	Islamic Republic of Iran
Program Title:	Tuberculosis Prevention in High Burden Areas, Islamic Republic of Iran
Grant Number:	IRN-708-G03-T
Disease:	Tuberculosis
Principal Recipient:	United Nations Development Program (UNDP)

Capitalized terms and acronyms used but not defined in this Annex A or the attachments to this Annex A have the meaning given to them in the Standard Terms and Conditions of this Agreement.

A. PROGRAM DESCRIPTION

1. Background and Summary:

Tuberculosis (TB) has been a major health problem and a threatening disease in Iran from the far past. Many interventions (like usage of short course chemotherapy since 1983, integration of TB control program in Primary Health Care (PHC) system since 1990, implementation of Directly Observed Treatment, Short-course (DOTS) in 1995, increase of the allocated budget from the government, active national, provincial and district technical committees and execution of educational and monitoring programs) made a decreasing trend in TB notification rates from 143 per 100,000 in 1964 to 13 per 100,000 in 2006. While the overall burden of TB is not extraordinary high (estimated incidence is 23 per 100,000), still around 16,000 people develop TB every year and 2,000 people die every year in Iran. More importantly, as observed in many countries with low to intermediate level of incidence, TB is increasingly concentrated in vulnerable populations.

In Iran, vulnerable populations include those who live in the 7 provinces in the southern and eastern part of Iran. These provinces account for 50% of TB cases in Iran but comprise only 23% of the total population (16.6 million). The incidence of TB is at least double the national average in these provinces.

Patients suffering from Multi Drug Resistant TB (MDR-TB), prisoners and people living with HIV/AIDS are other vulnerable populations.

Prisoners are at high risk of TB. TB incidence rate among prisoners is at least 5 times higher than the national average. HIV-TB co-infection is an important problem, particularly among Injecting Drug Users (IDUs).

Iran is committed to scaling up TB care with special emphasis on these vulnerable populations. Ministry of Health and Medical Education (MOHME) and partners will continue

IRN-708-G03-T Annex A Page 1 of 5

to finance the majority of the activities needed. However, there are certain activities that the national resources are not able to cover.

The Program is mainly focusing on the people of poor and high TB prevalence provinces which are neighboring the two high burden countries (Afghanistan and Pakistan). The Program, which is in line with the global TB Control Strategy, focuses to address the gaps and needs that cannot be covered by the governmental budget. A range of stakeholders have been involved in the process of proposal formulation and are beneficiaries of the Program. The main interventions include enhancement of high quality DOTs; addressing MDR-TB patients and prisoners, refugees and other high risk groups; and strengthening health management system.

2. Goal:

To dramatically reduce the burden of TB in the poor and vulnerable populations by 2015 in line with the MDGs and the Stop TB Partnership targets. To achieve this goal, the Program has the following four objectives.

- Pursue High-Quality DOTS expansion and enhancement;
- Address TB/HIV, MDR-TB and other challenges;
- Empower people with TB, and communities;
- Strengthen Program Management capacity.

The first three objectives are in line with the key components of the Stop TB Strategy, and the last objective is to strengthen program management capacity to ensure effective implementation of the Program.

3. Target Group/Beneficiaries:

- Population of 7 vulnerable provinces (Sistan & Baluchistan, Hormozgan, Khorasan razavi, Khorasan shomali, Khorasan jonoubi, Khuzestan and Golestan);
- Prisoners;
- MDR-TB patients;
- People living with HIV/AIDS (PLWHA).

4. Strategies:

The principle strategies include:

- TB case finding;
- Care and treatment;
- Strengthening of epidemiological surveillance system.

Supportive strategies include:

- Education and information dissemination;
- Improvement of information system;
- Strengthening of infrastructure;
- Capacity building of management structures.

- 5. Planned Activities:
 - Establishment of sputum smear microscopy laboratories;
 - Support for treatment observers;
 - Technical assistance for drug management system development;
 - Human resource development for M&E:
 - Support for mobility (transportation) for M&E;
 - Procurement of computers;
 - Technical assistance for upgrading M&E system (including revision of recording and reporting system);
 - In-depth review of M&E and other critical activities of the Program;
 - Improvement of CDC TB Management Information System and communication network for TB;
 - Establishment of 20 intermediate level culture laboratories;
 - Procurement of bio-safety cabinet for the remaining intermediate level laboratories;
 - Establishment of DST laboratories in 7 regions;
 - Renovation and equipment of quarantine ward and standardized isolation room for 65 prisons with large number of prisoners;
 - Support for TB care in prisons;
 - Conduct of pre & post KAP surveys for ACSM activities;
 - Conduct National TB Day campaigns;
 - Capacity building for strengthening program management at the national level;
 - Technical assistance for strengthening of program management capacity.

B. CONDITIONS PRECEDENT TO DISBURSEMENT

None.

C. SPECIAL TERMS AND CONDITIONS FOR THIS AGREEMENT

- 1. The Principal Recipient acknowledges and understands that the Global Fund has entered into this Agreement with the Principal Recipient in reliance on the representation by the Country Coordinating Mechanism that the funds provided under this Agreement do not constitute more than 65% of the funds for the national tuberculosis program in the Islamic Republic of Iran. If the Principal Recipient becomes aware that the funds provided under this Agreement are in fact or are anticipated to be materially higher than this amount, the Principal Recipient shall promptly notify the Global Fund.
- 2. The parties acknowledge that as of the date of the signature of this Amendment, the Global Fund has not approved the new plan for the procurement, use and supply management of Health Products (the "PSM Plan") consistent with Article 18 of the Standard Terms and Conditions of this Agreement. Consistent with such Standard Terms and Conditions, the disbursement by the Global Fund or use by the Principal Recipient of Grant funds for the procurement of Health Products is conditional upon the approval by the Global Fund of the PSM Plan.

- 3. The Principal Recipient will directly conduct all activities associated with the procurement of all goods and services funded by the Grant, including but not limited to conducting the selection process for vendors or service providers, and will make all payments for such goods and services directly to the respective vendors or service providers.
- 4. The Principal Recipient shall select Sub-recipients in accordance with its regulations and rules. Before disbursing grant funds to any Sub-recipient, the Principal Recipient shall notify the Global Fund of the selection of the Sub-recipient. In the case of a Sub-recipient that is not a UN agency, the Global Fund may, at its election, conduct an assessment of the Sub-recipient. The Principal Recipient shall address the assessment recommendations by risk mitigation measures satisfactory to both the Principal Recipient and the Global Fund.
- 5. When the Global Fund requests copies of Sub-recipient agreements from the Principal Recipient, the Principal Recipient shall provide such copies promptly, including any substantial changes to Sub-recipient Agreements which have been previously provided to the Global Fund. For the avoidance of the doubt, changes to the work plans and budgets associated with a Sub-recipient Agreement having an impact of more than 10% on any budget line will be considered substantial for purposes of this condition.
- 6. The use by the Principal Recipient of Grant funds for disbursement to any Subrecipient (other than the World Health Organization) is subject to the following conditions:
 - a. the Principal Recipient shall have signed an agreement with such Subrecipient for the entire Program period, which shall include, at a minimum, a budget, a workplan and implementation and reporting responsibilities of such Sub-recipient.
 - b. such Sub-recipient shall have received training on UNDP's financial reporting systems, as well as training on monitoring and evaluation techniques sufficient to enable it to meet its requirements under the Program.

D. FORMS APPLICABLE TO THIS AGREEMENT

For purposes of Article 13b(1) of the Standard Terms and Conditions of this Agreement entitled "Quarterly Reports," the Principal Recipient shall use the "On-going Progress Update and Disbursement Request", available from the Global Fund upon request.

E. ANTICIPATED DISBURSEMENT SCHEDULE

For the purposes of Article 6a. of the Standard Terms and Conditions of this Agreement, the anticipated disbursement schedule is indicated in the Performance Framework attached to this Annex A.

F. PROGRAM BUDGET

The Summary Budget(s) attached to this Annex A set forth anticipated expenditures for the Program term.

G. PERFORMANCE FRAMEWORK

The Performance Frameworks attached to this Annex A set forth the main objectives of the Program, key indicators, intended results, targets and reporting periods of the Program.

H. GLOBAL FUND STAGGERED FUNDING COMMITMENT POLICY

At the time of signing this Agreement, the Global Fund shall set aside ("commit") funds up to the amount of the First Commitment indicated in block 7 of the face sheet, subject to terms and conditions of this Agreement. The Global Fund will thereafter seek to commit funds up to the maximum financial commitment required to fund the third year of the Program (the "Second Commitment") not earlier than 31 March 2012. Any Second Commitment shall be undertaken in a manner consistent with the Global Fund's discretion and authority as described in Article 6 of this Agreement, taking into account, among other things, the reasonable cash flow needs of the Principal Recipient. The Second Commitment under this Program may be committed under this Agreement upon written notice sent by the Global Fund to the Principal Recipient. The Principal Recipient acknowledges and understands that the Second Commitment may not be released in full or part by the Global Fund in the event of non-compliance by the Principal Recipient to the terms of this Agreement, based on the sole judgment of the Global Fund.

SUMMARY BUDGET YEARS 3, 4 & 5

Tuberculosis

A		
(formerly Attachment	Program Details	

Country	Islamic Republic of Iran									
Grant No.	IRN-708-G03-T									
PR	UNDP									
Currency	USD									
Grant Cycle phase	Phase 2	-								
		(Please indicate Periods covered by this budget in the cells below, as presented in t	vered by this budget in the	cells below, as pres	ented in the Performance Framework)	amework)		- 1		
		Period 9 Period 10	Period 11 Period 12	Pe	Period 13 Period 14 Period 1	d 15 Period 16	Period 17	Period 18	Period 19	Period 20
Period Covered: from		1-Oct-10 1-Jan-11 1-Apr-11 1-Jul-11	1-Apr-11 1-Jul-11		1-Oct-11 1-Jan-12 1-Apr-12	r-12 1-Jul-12	1-0ct-12	1-Jan-13	1-Apr-13	1-Jul-13
Period Covered: to		31-Dec-10 31-Mar-11 30-Jun-11	30-Jun-11 30-Sep-11	31	31-Dec-11 31-Mar-12 30-Jun-12 3		31-Dec-12	31-Mar-13	30-Jun-13	30-Sep-13

A- SUMMARY BUDGET BREAKDOWN BY EXPENDITURE CATEGORY

			Year 3	-		Totai		Year 4			Total		Year	2		Total	TOTAL	
*	Category	Period 9	Period 10	Period 11 F	Period 12	Year 3	Period 13	Period 14 Pe	Period 15 Pe	Period 16	Year 4	Period 17	Period 18	Period 19	Period 20	Year 5	Phase 2	%
-	Human Resources	0	278.704	293.609	293,609	865,922	296,548	312.986	312,986	312.986	1,235,507	316.072	333,661	333,661	333,661	1,317,055	3,418,484	40%
0	Technical Assistance	0	15.840	15,840	15,840	47,520	15,840	16.739	23.799	23.799	80,176	16,739	17,701	17,340	17,701	69,480	197,176	5 2%
1 07	Training	0	7.000	32.000	7,000	46,000	6,500	32,000	7.000	7,000	52,500	6,500	32,000	7,000	7,000	52,500	151,000	
4	Health Products and Health Equipment	0	0	0	444,393	444,393	0	0	0	381.701	381,701	0	0	0	191,332	191,332	1,017,425	12%
47	Medicines and Pharmaceutical Products	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0
40	Procurement and Supply Management Costs	0	0	0	47,177	47,177	0	0	0	47,177	47,177	0	0	0	23,648	23,648	118,001	1 1%
2	Infrastructure and Other Equipment	0	9,894	10.094	247,402	267,390	16,159	11,196	23,196	11,196	61,746	11,295	12,473	12,473	12,473	48,713	377,849	4%
- 60	Communication Materials	171.210	8,440	2,000	14,000	195,650	183,400	0	2.000	14,000	199,400	183,650	0	2,000	0	185,650	580,700	
0	Monitoring and Evaluation	12,200	346,430	134,830	136,830	630,290	137.170	167,170	137,170	161.185	602,695	212.710	169.510	139,510	255,105	776,835	2,009,820	23%
10	Living Support to Clients/Target Population	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		-
11	Planning and Administration	0	11,000	11,000	11,000	33,000	11,000	11,000	11,000	11,000	44,000	11,000	11.000	11,000	11,000	44,000	121,000	1%
12	Overheads	12,839	49,198	36,742	86,994	185,772	48,449	40,487	39,094	73,719	201,750	54,969	42,389	38,604	67,357	203,318	590,840	0 7%
13	Other	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0
	10144	196,249	726,506	536,115	1,304,244	2,763,114	715,066	591,578	556,244 1	,043,762	2,906,651	812,935	618,733	561,587	919,276	2,912,531	8,582,295	5 100%

B. SUMMARY BUDGET BREAKDOWN BY PROGRAM ACTIVITY

L					Year 3			Total		Year	114		Total		Y	Year 5		Total	TOTAL	
**	Macro-category	Objectives	Service Delivery Area	Period 9	Period 10	Period 11 P	Period 12	Year 3	Period 13	Period 14	Period 15	Period 16	Year 4	Period 17	Period 18	Period 19	19 Period 20	0 Year 5	Phase 2	%
-	TB Treatment	To pursue high-quality DOTS enhancement	Standardized treatment with supervision and primer support. Case detection through qualty-assured bacteriology. Establishment of an effective drug supply and imanagement system: M&E system and	0	468.203	332,508	761,386	1,562,097	334,668	379,502	368,562	789,379	1,872,111	351,662	397,534	367	534 408,354	1,525,083	4,959,290	58%
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	TB Detection	Address TB/HIV, MDR-TB & other challenges	Improving diagnosis (Prevent and control multi-drug resistant TB); Address TB care for microres	12,200	64,690	3,690	303,690	384,270	3,870	3,870	3,870	13,885	25,495	77,250		4,050 4,0	4,050 219,029	29 304,379	9 714,144	4 8%
0	TB: Supportive Environment	To empower people with TB, and communities	ACSM (Advocacy, communication and sectal mobilization)	171,210	8,440	2,000	14,000	195,650	183,400	0	2,000	14,000	199,400	183,650	0	0 2.0	2,000 71,775	257	425 652,475	S 8%
4	TB: Health Systems Strengthening (HSS)	To strengthen the capacity of health system to coordinate and Capacity building for trengthening program implement TB control interventions Dependence: State and an analysis of the strengtheness state and an analysis of the Interventional constructions and an analysis of the strengtheness state and an analysis of the	<ul> <li>Caspacity building for strengthening program management: Human Resources</li> <li>Development: Supply management &amp; Inforestructure development</li> </ul>	0	54,086	79,286	54,286	187,657	54,286	81,789	56,789	63,849	256,714	56,789	84	468 59,	59,108 59,4	466 259,834	4 704,205	5 8%
50	TB: Supportive Environment	UNDP General Management Service (GMS) 7%: PR Organizational and Operational Support Cost and WHO Programme Support Cost	Supportive environment: Program management and administration	12,839	131,087	118,631	170.883	433,440	138.842	126,417	125.023	162,649	552,931	143.584	132,681	128,896	160,649	49 565,810	0 1,552,181	18%
			TOTAL	196,249	726,506	536,115	1,304,244	2,763,114	715,066	591,578	556,244	1,043,762	2,906,651	812,935	618,733	561	587 919,276	76 2,912,53	8,582,295	100%
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10 F Dr	the purposes of this report, the SDA	For the purposes of this report, the SDA Program management and administration should be included in the Supportive Erricionment Macro Collegory.	ortive Environment Macro Category.																	

C, SUMMARY BUDGET BREAKDOWN BY IMPLEMENTING ENTITY (If known by Grant algorithm time) and adminis

		Type of		Year 3			Total		Year 4		Total	10		Year 5			Total	TOTAL	
ANNA A	Narrie	Implementing Entity	Period 9	Period 10 P	Period 11 P	eriod 12 Y	Year 3 P.	Period 13 Per	eriod 14 Perio	riod 15 Period 1	d 16 Year 4	9	eriod 17 Perio	eriod 18 Pe	eriod 19 Pe	Period 20	Year 5	Phase 2	%
1 SR	Center for Disease Control	Ministry of Health (MoH)	171.210	497.992	381.057	796.935	1.847.194	539.617	426.933 38	385,933 814,810	2	167,294 55	7.743	445,909	392,909	677,663	2,074,223	6,088,711	71%
2 SR	Prisons Organization	Other Government	12.200	84.587	23.587	323.586	443,960	23.767	24,489 2	24,489 24	24,489 9	97,235 9	97,869	25,443	25,443	25,443	174,198	715,393	8%
3 SR	OHM	Other Multilateral Organisation	0	14,509	14,509	14,509	43,528	14,509	1	23,503 47		Ű.	5,525	16,612	16,204	62,738	111,079	255,393	3%
4 PR	UNDP	UNDP	12,839	129,418	116,962	169,214	428,432	137,173 1	124.631 12	122,319 157	57,213 54	541,336 14	141,798	130.770	127,032	153,432	553,031	1,522,800	18%
		TOTAL*	196,249	726,506	536,115 1	1,304,244	2,763,114	715,066		+	043,762 2,90	,906,651 81	2,935	618,733	561,587	919,276	2,912,531	8,582,295	100%
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