



GAVI/13/597/dlc

The Minister of Health
Ministry of Health
Government Building No.3
375001 Yerevan
Armenia

28 October 2013

Dear Minister,

Annual Progress Report submitted by Armenia

I am writing in relation to Armenia's Annual Progress Report (APR) which was submitted to the GAVI Secretariat in May 2013.

Following a meeting of the GAVI Independent Review Committee (IRC) from 15 to 26 July 2013 to consider your APR, I am pleased to inform you that the GAVI Alliance has approved Armenia for GAVI support as specified in the Appendices to this letter. This letter and its appendices includes the support for the introduction of pneumococcal vaccine (PCV10) as it was approved by the GAVI Executive Committee (EC), at its meeting on 26 September 2011.

The Appendices includes the following important information:

Appendix A: Description of approved GAVI support to Armenia

Appendix B: Financial and programmatic information per type of support

Appendix C: A summary of the IRC Report

Appendix D: The terms and conditions of GAVI Alliance support

The same appendices are also used in the Partnership Framework Agreement (PFA) – a new simplified arrangement that we are working to agree with your colleagues – that will replace this 'decision letter' format.

The following table summarises the outcome for each type of GAVI support for Armenia :

Type of support	Appendix	Approved for 2014
New vaccines support (pentavalent vaccine)	B-1	US\$122,500
New vaccines support (rotavirus vaccine)	B-2	US\$93,000
New vaccines support (pneumococcal vaccine)	B-3	US\$821,000



Please do not hesitate to contact my colleague Nilgun Aydogan (naydogan@gavialliance.org) if you have any questions or concerns.

Yours sincerely,

A handwritten signature in blue ink, appearing to read "Hind Khatib-Othman".

for Hind Khatib-Othman
Managing Director, Country Programmes

cc: The Minister of Finance
Director Planning Unit, MoH
The EPI Manager
WHO Country Representative
UNICEF Country Representative
WHO HQ
WHO EURO
UNICEF Programme Division
UNICEF Supply Division
UNICEF Regional Office
The World Bank



Appendix A

Description of GAVI support to Armenia (the “Country”)

New Vaccines Support (NVS)

The GAVI Alliance has approved the Country’s request for supply of vaccine doses and related injection safety material which are estimated to be required for the immunization programme as set out in Appendix B. Financing provided by GAVI for vaccines will be in accordance with:

- The GAVI Alliance Guidelines governing Country’s Annual Progress Report (APR); and
- The APR as approved by the the Independent Review Committee (IRC), including any subsequent clarifications.

The vaccines provided will be used as the country has proposed. The principles of the WHO-UNICEF-UNFPA joint statement on safety of injections (WHO/V&B/99.25) shall apply to all immunisation provided with these vaccines.

Item number 11 of Appendix B summarises the details of the approved GAVI support for vaccines in the years indicated.

Any required taxes, customs, toll or other duties imposed on the importation of vaccines and related supplies can not be paid for using GAVI funds.

GAVI is not responsible for any liability that may arise in connection with the distribution or use of vaccines and related supplies after title to such vaccines and related supplies has passed to the country, excluding liability for any defect in vaccines and related supplies, which remain the responsibility of the applicable manufacturer.

Country Co-financing

In accordance with the GAVI Co-financing Policy, the Country has agreed to make the required contribution to co-financing vaccine doses as indicated in Appendix B. Item number 14 of Appendix B summarises the budget and the quantity of supply that will be procured with country’s funds in the corresponding timeframe. The total co-financing amount indicates costs for the vaccines, related injection safety devices (only applicable to intermediate and graduating countries) and freight.

Countries may select to co-finance through UNICEF Supply Division, PAHO’s Revolving Fund, or self-procure their co-financing requirement following their own procedures, except for the Pneumococcal vaccine that needs to be procured through UNICEF.

If the purchase of the co-financed supply is carried out through UNICEF or PAHO, the payment is to be made to UNICEF or PAHO (whichever is applicable) as agreed in the Procurement Services Memorandum of Understanding between UNICEF or PAHO (whichever is applicable) and the country, and not to the GAVI Alliance. Please keep in contact with UNICEF or PAHO (whichever is applicable) to understand the availability of the relevant vaccine(s) and to prepare the schedule of deliveries.



The total co-financing amount expressed in item number 14 of Appendix B does not contain costs and fees of the relevant Procurement Agency, such as contingency buffer and handling fees.

Information on these extra costs and fees will be provided by the relevant Procurement Agency as part of the cost estimate to be requested by the country. UNICEF/PAHO will share information with GAVI on the status of purchase of the co-financed supply. In accordance with the GAVI Co-financing Policy (<http://www.gavialliance.org/about/governance/programme-policies/co-financing/>), the co-financing contribution is payable annually to UNICEF/PAHO.

If the purchase of the co-financed supply is carried out by the Government, following its own procurement procedures and not procuring from UNICEF Supply Division or PAHO's Revolving Fund, the Government must submit to GAVI satisfactory evidence that it has purchased its co-financed portion of the vaccines and related supplies, including by submitting purchase orders, invoices, and receipts to GAVI. GAVI encourages that countries self-procuring co-financed products (i.e. auto-disable syringes and syringe and needle disposal boxes) ensure that products appear on the applicable WHO list of pre-qualified products or, for syringe and needle disposal boxes, that they have obtained a certificate of quality issued by a relevant national authority.

GAVI support will only be provided if the Country complies with the following requirements:

Transparency and Accountability Policy (TAP): Compliance with any TAP requirements pursuant to the GAVI TAP Policy and the requirements under any Aide Memoire concluded between GAVI and the country.

Financial Statements & External Audits: Compliance with the GAVI requirements relating to financial statements and external audits.

Grant Terms and Conditions: Compliance with GAVI's standard grant terms and conditions (attached in Appendix D).

Country Co-financing: GAVI must receive proof of country co-payment from the Country such as invoices or shipment receipts if neither UNICEF nor PAHO is the procurement agent for country co-financed vaccine for the prior calendar year.

Monitoring and Annual Progress Reports: Country's use of financial support for the introduction of new vaccinations with the vaccine(s) specified in Appendix B is subject to strict performance monitoring. The GAVI Alliance uses country systems for monitoring and auditing performance and other data sources including WHO/UNICEF immunization coverage estimates. As part of this process, National Authorities will be requested to monitor and report on the numbers of children immunised and on co-financing of the vaccine.

Country will report on the achievements and request support for the following year in the Annual Progress Report (APR). The APR must contain information on the number of children reported to have been vaccinated with DTP3 and 3 doses of pentavalent vaccine by age 12 months, based on district monthly reports reviewed by the Immunisation Coordination Committee (ICC), and as reported to WHO and UNICEF in the annual Joint Reporting Form (JRF). The APRs will also contain information on country's compliance with the co-financing



arrangements outlined in this letter. APRs endorsed by the ICC, should be sent to the GAVI Secretariat no later than 15 May every year. Continued funding beyond what is being approved in this letter is conditional upon receipt of satisfactory Annual Progress Reports and availability of funds.

ARMENIA'S VACCINE SUPPORT

This Decision Letter sets out the Programme Terms of a Programme.

1. Country: Armenia				
2. Grant Number: 1115-ARM-04b-X				
3. Decision Letter date: 28/10/2013				
4. Date of the Partnership Framework Agreement: Not applicable				
5. Programme Title: New Vaccine Support				
6. Vaccine type: Pentavalent				
7. Requested product presentation and formulation of vaccine: DTP-HepB-Hib, 2 dose(s) per vial, LYO				
8. Programme Duration¹: 2009 -2015				
9. Programme Budget (indicative) (subject to the terms of the Partnership Framework Agreement):				
	2009-2013	2014	2015	Total ²
Programme Budget (US\$)	US\$1,691,543 ³	US\$122,500	US\$74,000	US\$1,888,043
10. Vaccine Introduction Grant: Not applicable				

¹ This is the entire duration of the programme.

² This is the total amount endorsed by GAVI for the entire duration of the programme. This should be equal to the total of all sums in the table.

³ This is the consolidated amount for all previous years.

11. Indicative Annual Amounts (subject to the terms of the Partnership Framework Agreement):⁴		
Type of supplies to be purchased with GAVI funds in each year	2009-2013	2014
Number of Pentavalent vaccines doses		55,000
Number of AD syringes		55,200
Number of re-constitution syringes		30,300
Number of safety boxes		625
Annual Amounts (US\$)	US\$1,691,543 ⁵	US\$122,500
12. Procurement agency: UNICEF. The Country shall release its Co-Financing Payments each year to UNICEF.		
13. Self-procurement: Not applicable.		
14. Co-financing obligations: Reference code: 1115-ARM-04b-X-C According to the Co-Financing Policy, the Country falls within the Graduating group. The following table summarises the Co-Financing Payment(s) and quantity of supply that will be procured with such funds in the relevant year.		
Type of supplies to be purchased with Country funds in each year	2014	2015
Number of vaccine doses	110,200	114,700
Number of AD syringes	110,400	
Number of re-constitution syringes	60,600	
Number of safety boxes	1,250	
Value of vaccine doses (US\$)	US\$215,717	
Total Co-Financing Payments (US\$) (including freight)	US\$244,500	US\$253,500
15. Operational support for campaigns: Not applicable		

⁴ This is the amount that GAVI has approved.

⁵ This is the consolidated amount for all previously approved years.

Additional documents to be delivered for future disbursements:	
Reports, documents and other deliverables	Due dates
Annual Progress Report 2013	15 May 2014
<p>16. Financial Clarifications: The Country shall provide the following clarifications to GAVI*: Not applicable <i>*Failure to provide the financial clarifications requested may result in GAVI withholding further disbursements</i></p>	
<p>17. Other conditions: Not applicable.</p>	

Signed by,
On behalf of the GAVI Alliance



H Hind Khatib-Othman
 Managing Director, Country Programmes

28 October 2013

ARMENIA'S VACCINE SUPPORT

This Decision Letter sets out the Programme Terms of a Programme.

1. Country: Armenia				
2. Grant Number: 1215-ARM-13b-X				
3. Decision Letter date: 28/10/2013				
4. Date of the Partnership Framework Agreement: Not applicable				
5. Programme Title: New Vaccine Support				
6. Vaccine type: Rotavirus				
7. Requested product presentation and formulation of vaccine: Rota, 2 dose(s)				
8. Programme Duration⁶: 2012-2015				
9. Programme Budget (indicative) (subject to the terms of the Partnership Framework Agreement):				
	2012-2013	2014	2015	Total ⁷
Programme Budget (US\$)	US\$321,370 ⁸	US\$93,000	US\$55,000	US\$469,370
10. Vaccine Introduction Grant: Already disbursed				

⁶ This is the entire duration of the programme.

⁷ This is the total amount endorsed by GAVI for the entire duration of the programme. This should be equal to the total of all sums in the table.

⁸ This is the consolidated amount for all previous years.

11. Indicative Annual Amounts (subject to the terms of the Partnership Framework Agreement):⁹		
Type of supplies to be purchased with GAVI funds in each year	2012-2013	2014
Number of Rotavirus vaccines doses		36,000
Number of AD syringes		
Number of re-constitution syringes		
Number of safety boxes		
Annual Amounts (US\$)	US\$321,370 ¹⁰	US\$93,000
12. Procurement agency: UNICEF. The Country shall release its Co-Financing Payments each year to UNICEF.		
13. Self-procurement: Not applicable.		
14. Co-financing obligations: Reference code: 1215-ARM-13b-X-C According to the Co-Financing Policy, the Country falls within the Graduating group. The following table summarises the Co-Financing Payment(s) and quantity of supply that will be procured with such funds in the relevant year.		
Type of supplies to be purchased with Country funds in each year	2014	2015
Number of vaccine doses	55,200	74,100
Number of AD syringes		
Number of re-constitution syringes		
Number of safety boxes		
Value of vaccine doses (US\$)	US\$129,597	
Total Co-Financing Payments (US\$) (including freight)	US\$137,000	US\$183,500
15. Operational support for campaigns: Not applicable		

⁹ This is the amount that GAVI has approved.

¹⁰ This is the consolidated amount for all previously approved years.




Additional documents to be delivered for future disbursements:	
Reports, documents and other deliverables	Due dates
Annual Progress Report 2013	15 May 2014

16. Financial Clarifications: The Country shall provide the following clarifications to GAVI*:
Not applicable
**Failure to provide the financial clarifications requested may result in GAVI withholding further disbursements*

17. Other conditions: Not applicable.

Signed by,
On behalf of the GAVI Alliance


Hind Khatib-Othman
Managing Director, Country Programmes

28 October 2013

Armenia VACCINE SUPPORT

This Decision Letter sets out the Programme Terms of a Programme.

1. Country: Armenia				
2. Grant Number: 1315-ARM-12b-X / 13-ARM-08a-Y				
3. Decision Letter date: 28/10/2013				
4. Date of the Partnership Framework Agreement: Not applicable				
5. Programme Title: New Vaccines Support				
6. Vaccine type: Pneumococcal				
7. Requested product presentation and formulation of vaccine: Pneumococcal (PCV10), 2 dose(s) per vial , LIQUID				
8. Programme Duration¹¹: 2014				
9. Programme Budget (indicative) (subject to the terms of the Partnership Framework Agreement):				
	2013	2014	2015	Total ¹²
Programme Budget (US\$)	US\$0	US\$821,000	US\$613,500	US\$1,434,500
10. Vaccine Introduction Grant: Already disbursed				

¹¹ This is the entire duration of the programme.

¹² This is the total amount endorsed by GAVI for the entire duration of the programme. This should be equal to the total of all sums in the table.

11. Indicative Annual Amounts (subject to the terms of the Partnership Framework Agreement):¹³

Type of supplies to be purchased with GAVI funds in each year	2013	2014
Number of Pneumococcal vaccines doses	0	152,400
Number of AD syringes	0	154,400
Number of re-constitution syringes		
Number of safety boxes	0	1,725
Annual Amounts (US\$)	US\$0	US\$821,000

12. Procurement agency: UNICEF. The Country shall release its Co-Financing Payments each year to UNICEF.

13. Self-procurement: Not applicable.

14. Co-financing obligations: Reference code: 1315-ARM-12b-X-C . According to the Co-Financing Policy, the Country falls within the Graduating group. The following table summarises the Co-Financing Payment(s) and quantity of supply that will be procured with such funds in the relevant year.

Type of supplies to be purchased with Country funds in each year	2013	2014	2015
Number of vaccine doses	0	31,600	52,200
Number of AD syringes	0	32,000	
Number of re-constitution syringes			
Number of safety boxes	0	375	
Value of vaccine doses (US\$)	US\$0	US\$107,152	
Total Co-Financing Payments (US\$) (including freight)	US\$0	US\$112,500	US\$183,000

15. Operational support for campaigns: Not applicable

¹³ This is the amount that GAVI has approved.

16. Additional documents to be delivered for future disbursements:

Reports, documents and other deliverables	Due dates
Annual progress Report 2013	15 May 2014


17. Clarifications: *Not applicable*

**Failure to provide the financial clarifications requested may result in GAVI withholding further disbursements*

18. Other conditions: Not applicable.

Signed by,

On behalf of the GAVI Alliance



Hind Khatib-Othman
Managing Director, Country Programmes

28 October 2013

Type of report: Annual Progress Report
Country: Armenia
Reporting period: 2012
Date reviewed: July 2013

1. Background Information

Surviving Infants (2012): 40,387 (JRF)

DTP3 coverage (2012):

- JRF Official Country Estimate: 95
- WHO/UNICEF Estimate: 95

Table 1. NVS and INS Support

NVS and INS support	Approval Period
HepB monovalent	2001 – 2008
DTP-HepB-Hib	2009 – 2015
Rotavirus	2012 – 2015
Pneumococcal (PCV10)	2013 – 2015
INS	2002 – 2004

Table 2. Cash Support

Cash support	Approval Period
ISS 1	2001 – 2006
HSS	2008 – 2012

2. Composition and Functioning of Inter-agency Coordinating Committee (ICC) / Health Sector Coordinating Committee (HSCC)

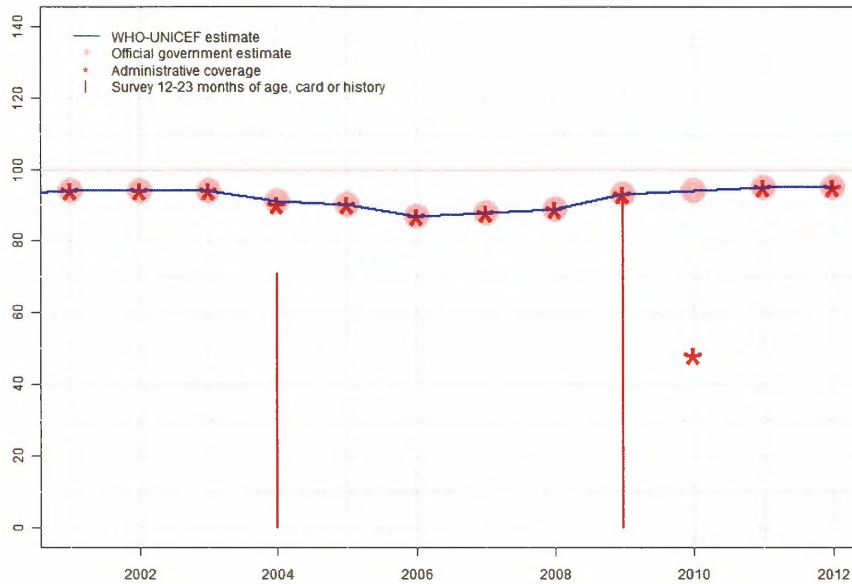
The ICC and HSCC are two separate committees, which hold a joint meeting each year to approve the APR for submission to GAVI. The ICC consists of 28 members; including the Minister of Health (Chair), EPI Manager (secretary), high-ranking government officials (mostly deputy ministers) from related government ministries, WHO, UNICEF, VRF, World Bank, USAID, and two NGOs. The HSCC consists of senior ministry of health officials.

In the 12 months preceding the submission of the APR the HSCC met four times; The ICC met only twice during this period (on 10 May 2012 and 07 May 2013, in joint meetings with the HSCC) to endorse the APR 2011 and APR 2012 respectively. The APR 2012 was approved at the ICC meeting of 07 May 2013, chaired by the Minister of Health. The IRC notes the broad based representation of government ministries within the ICC. However, the ICC is concerned that 4 of the 7 non-governmental members of the ICC did not participate in the ICC/HSCC meeting of 07 May 2013 that endorsed the APR.

In addition to endorsing the APR 2012, the ICC meeting of 07 May 2013 also discussed and reached agreement on new vaccine (DTP+HepB+HIB lyoph, Rota) vaccine support extension, and the new calendar for introduction of the pneumococcal conjugate vaccine.

3. Programme and Data Management

ARM - DTP3



Number of surviving infants (40,387) indicated in 2012 JRF coincides with the same data in APR. However, MoH of Armenia uses its own formula to calculate coverage for routine vaccines that is different from the formula utilized by GAVI. The denominator used in Armenia is number of children who reached age of 12 months in the reporting year. The MoH of Armenia collects data on this denominator from primary health facilities that have registries of children resigning in their catchment area. These registries are updated annually based on household surveys.

GAVI utilizes different denominator to calculate the coverage: number of surviving infants in the reporting year. As the denominator used by MoH to calculate administrative coverage and the denominator used by GAVI might be different, so figures reported in JRF and in APR might be also different.

Overall the proportion of fully vaccinated children increased from 86% in 2008 to 95% in 2012. The country attributes this improvement to the following semi-annual reporting of programme performance to government, quarterly supportive supervision and feedback to local authorities, upgrade of cold chain at primary healthcare level, and other activities.

4. Gender and Equity Analysis

Armenia does not report sex-disaggregated data, and have no plans to do so in future. The country reports that there are no observable gender inequalities affecting the access to the health facilities that offer immunization which is reflected by the high national coverage rates.

5. Immunisation Services Support (ISS)

Not applicable

6. New and under-utilised Vaccines Support (NVS)

DTP-HepB+Hib lyophilised in 2 dose vials presentation

Armenia received 110,800 doses GAVI funded and 39,100 doses co-financing as per 2012 GAVI Decision letter. There were no stock-outs or over stocks in 2012. The country achieved 95% coverage in 2012 and is targeting 96% coverage in 2014, which is reasonable. Drop-out rate in 2014 is estimated at 2%.

Rota virus vaccine

Armenia received 114,000 doses in 2012 as per APR. No stock-outs or over stocks in 2012. Section 4: Armenia did not introduce rota until Nov 2012, which explains the low 3% coverage (vs. 70% originally proposed). This is commented on in Section 7. The 2013 rotavirus vaccine last dose coverage figure of 98% seems high, compared to 93% and 95% for 2014 and 2015 respectively, but this may be explained by the late introduction in 2012 and hence the second dose being given in 2013. The age restrictions on rotavirus vaccine administration may explain the slightly higher drop out for rotavirus (5%)

Pneumococcal conjugate vaccine, 10-valent, vial of 2 dose:

Introduction has been subsequently postponed to Jan 2014.

Cold chain capacity

The majority of the EVM improvement plan is completed. However the country did not provide details as requested in the decision letter (could be a resourcing issue as it would require significant effort to re-do some of the components of the EVM).

Surveillance

Armenia has initiated sentinel surveillance for rotavirus diarrhea and pediatric bacterial meningitis. In addition, the country reports that the NITAG regularly reviews the sentinel surveillance data to provide recommendations on the data generated and how to further improve data. The data will also be used to monitor and evaluate the impact of vaccine introduction and use.

7. Vaccine Co-financing, Financial Sustainability and Financial Management

Armenia is a graduating country. The country started mandatory co-financing of pentavalent vaccine in 2009 and rotavirus vaccine in 2012. The country is a good performer: timely payment of the co-financing obligations; in 2010 and 2011, Armenia voluntarily co-financed more than double the number of doses required.

All financial expenditures are monitored by a governmental accounting agency. The ICC approves the APR with the information about financial expenditures, funding requests for the next calendar year and possible changes in planned activities to be discussed at the ICC. As Armenia graduates from the GAVI system, the country and its partners would need to give considerable thought to the issues of financial sustainability as vaccines procured outside the GAVI-UNICEF procurement system tend to be more expensive.

8. Injection Safety Support (INS) and Adverse Events Following Immunisation Systems

Armenia reports having a national dedicated vaccine pharmaco-vigilance capacity, a national AEFI expert review committee, an institutional development plan for vaccine safety, and shares vaccine safety data with other countries. All vaccine injections in Armenia use auto-disable syringes, funded by the government and GAVI. Sharp waste is disposed of by incineration and open burning. In addition, the country has developed and implemented a comprehensive communication and social mobilisation on injection safety for parents and health professionals.

9. Health Systems Strengthening (HSS)

HSS proposal coverage period was 2008 to 2010 (3 years); extended until 2012 (5 years). There were five objectives of the HSS proposal relating to motivation of personnel, skills upgrading, supportive supervision, and service delivery capacity. Armenia has shown good progress through implementation of the activities planned for 2012, most often surpassing the targets set in the initial HSS proposal submission. Considerable HSS funds were used in 2012 for system upgrades, new vaccine introductions, and M&E. The country did not, however, report on output indicators. Overall, this has been a successfully implemented HSS proposal.

10. Civil Society Organization Type A/Type B (CSO)

Not applicable

11. Risks and mitigating factors

Armenia has a functioning NRA and NITAG, whose capacities are in need of strengthening. Armenia has to think of vaccine registration, licencing, and procurement issues. Currently the country buys vaccines through the UNICEF Supply Division, which gives them access to vaccines at affordable prices. Should the country decide for self-procurement after graduation, many areas linked to the immunisation programme including NRA and NITAG would need improvement. In all there would need to be a well thought through graduation plan for Armenia which has been a star performer in terms of immunisation programme activities.

12. Summary of 2012 APR Review

Armenia is a high performing country and with good coverage data. The government of Armenia is a major financial supporter of the NIP. Support of the programme, along with key partners, has resulted in DTP3 coverage increasing to 95%. This result is to be commended. Despite some concerns over surviving infant data source and reference points, overall there are no major indications about problems over coverage data. This is also confirmed with the fact that Armenia is the only country in the region with no measles outbreak or cases while her neighbours all experienced measles outbreaks. There is a lot of political commitment and very good understanding among the decision makers about the value of vaccines and importance of a solid immunisation program. The country has no outstanding TAP issues.

13. IRC Review Recommendations

- **ISS**
Not applicable
- **NVS**
 - 1) Approve 2014 **DTP-HepB-Hib** support based on country requested targets
 - 2) Approve 2014 **rotavirus vaccine** support based on country requested targets
- **HSS**
Not applicable



Appendix D

GAVI Alliance Terms and Conditions

Countries will be expected to sign and agree to the following GAVI Alliance terms and conditions in the application forms, which may also be included in a grant agreement to be agreed upon between GAVI and the country:

FUNDING USED SOLELY FOR APPROVED PROGRAMMES

The applicant country ("Country") confirms that all funding provided by the GAVI Alliance for this application will be used and applied for the sole purpose of fulfilling the programme(s) described in this application. Any significant change from the approved programme(s) must be reviewed and approved in advance by the GAVI Alliance. All funding decisions for this application are made at the discretion of the GAVI Alliance Board and are subject to IRC processes and the availability of funds.

AMENDMENT TO THIS PROPOSAL

The Country will notify the GAVI Alliance in its Annual Progress Report if it wishes to propose any change to the programme(s) description in this application. The GAVI Alliance will document any change approved by the GAVI Alliance, and this application will be amended.

RETURN OF FUNDS

The Country agrees to reimburse to the GAVI Alliance, all funding amounts that are not used for the programme(s) described in this application. The country's reimbursement must be in US dollars and be provided, unless otherwise decided by the GAVI Alliance, within sixty (60) days after the Country receives the GAVI Alliance's request for a reimbursement and be paid to the account or accounts as directed by the GAVI Alliance.

SUSPENSION/ TERMINATION

The GAVI Alliance may suspend all or part of its funding to the Country if it has reason to suspect that funds have been used for purpose other than for the programmes described in this application, or any GAVI Alliance-approved amendment to this application. The GAVI Alliance retains the right to terminate its support to the Country for the programmes described in this application if a misuse of GAVI Alliance funds is confirmed.

ANTICORRUPTION

The Country confirms that funds provided by the GAVI Alliance shall not be offered by the Country to any third person, nor will the Country seek in connection with this application any gift, payment or benefit directly or indirectly that could be construed as an illegal or corrupt practice.

AUDITS AND RECORDS

The Country will conduct annual financial audits, and share these with the GAVI Alliance, as requested. The GAVI Alliance reserves the right, on its own or through an agent, to perform audits or other financial management assessment to ensure the accountability of funds disbursed to the Country.

The Country will maintain accurate accounting records documenting how GAVI Alliance funds are used. The Country will maintain its accounting records in accordance with its government-approved accounting standards for at least three years after the date of last disbursement of GAVI Alliance funds. If there is any claims of misuse of funds, Country will maintain such records until the audit findings are final. The Country agrees not to assert any documentary privilege against the GAVI Alliance in connection with any audit.



CONFIRMATION OF LEGAL VALIDITY

The Country and the signatories for the government confirm that this application is accurate and correct and forms a legally binding obligation on the Country, under the Country's law, to perform the programmes described in this application.

***CONFIRMATION OF COMPLIANCE WITH THE GAVI ALLIANCE
TRANSPARANCY AND ACCOUNTABILITY POLICY***

The Country confirms that it is familiar with the GAVI Alliance Transparency and Accountability Policy (TAP) and will comply with its requirements.

ARBITRATION

Any dispute between the Country and the GAVI Alliance arising out of or relating to this application that is not settled amicably within a reasonable period of time, will be submitted to arbitration at the request of either the GAVI Alliance or the Country. The arbitration will be conducted in accordance with the then-current UNCITRAL Arbitration Rules. The parties agree to be bound by the arbitration award, as the final adjudication of any such dispute. The place of arbitration will be Geneva, Switzerland. The language of the arbitration will be English.

For any dispute for which the amount at issue is US\$ 100,000 or less, there will be one arbitrator appointed by the GAVI Alliance. For any dispute for which the amount at issue is greater than US \$100,000 there will be three arbitrators appointed as follows: The GAVI Alliance and the Country will each appoint one arbitrator, and the two arbitrators so appointed will jointly appoint a third arbitrator who shall be the chairperson.

The GAVI Alliance will not be liable to the country for any claim or loss relating to the programmes described in this application, including without limitation, any financial loss, reliance claims, any harm to property, or personal injury or death. Country is solely responsible for all aspects of managing and implementing the programmes described in this application.

USE OF COMMERCIAL BANK ACCOUNTS

The eligible country government is responsible for undertaking the necessary due diligence on all commercial banks used to manage GAVI cash-based support, including HSS, ISS, CSO and vaccine introduction grants. The undersigned representative of the government confirms that the government will take all responsibility for replenishing GAVI cash support lost due to bank insolvency, fraud or any other unforeseen event.