

OFFICIAL DOCUMENTS

H Z. PSWARAYI-RIDDIHOUGH
Country Director
Mozambique, Madagascar, Mauritius, Comoros and Seychelles

Date: December 23, 2021

H.E Adriano Afonso Maleiane Minister of Economy and Finance Ministry of Economy and Finance Av. 10 de Novembro, No. 929, 1° Andar Maputo, Mozambique

Re: Grant No. IDA D958-MZ
(Additional financing for the Mozambique COVID-19 Strategic
Preparedness and Response Project)
Additional Instructions: Disbursement and Financial Information Letter

#### Excellency:

I refer to the Grant Agreement between Republic of Mozambique (the "Recipient") and the International Development Association (the "Association") for the above-referenced Project. The General Conditions, as defined in the Grant Agreement, provide that the Recipient may from time-to-time request withdrawals of Grant amounts from the Grant Account in accordance with the Disbursement and Financial Information Letter, and such additional instructions as the Association may specify from time to time by notice to the Recipient. The General Conditions also provide that the Disbursement and Financial Information Letter may set out Project specific financial reporting requirements. This letter constitutes such Disbursement and Financial Information Letter ("DFIL") and may be revised from time to time.

## I. Disbursement Arrangements, Withdrawal of Grant Funds, and Reporting of Uses of Grant Funds

The Disbursement Guidelines for Investment Project Financing, dated February 2017, ("Disbursement Guidelines") are available in the Association's public website at <a href="https://www.worldbank.org">https://www.worldbank.org</a> and its secure website "Client Connection" at <a href="https://clientconnection.worldbank.org">https://clientconnection.worldbank.org</a>. The Disbursement Guidelines are an integral part of the DFIL, and the manner in which the provisions in the guidelines apply to the Grant is specified below.

#### (i) Disbursement Arrangements

• General Provisions (Schedule 1). The table in Schedule 1 sets out the disbursement methods which may be used by the Recipient, information on registration of authorized signatures, processing of withdrawal applications (including minimum value of applications and processing of advances), instructions on supporting documentation, and frequency of reporting on the Designated Account.

• Special Provision. Projects in situations of urgent need of assistance or capacity constraints: Disbursements under contracts for goods, works, non-consulting services and consulting services procured or selected through international open or limited competition or Direct Selection, as set out in the procurement plan, must be made only through Direct Payment and/or Special Commitment disbursement methods

#### (ii) Electronic Delivery. Section 11.01(c) of the General Conditions.

The Association may permit the Recipient to electronically deliver applications (with documents) through Association's the web-based (https://clientconnection.worldbank.org) "Client Connection". This option may be affected if the officials designated in writing by the Recipient who are authorized to sign and deliver Applications have registered as users of "Client Connection". The designated officials may deliver Applications electronically by completing the Form 2380, which is accessible through "Client Connection". By signing the Authorized Signatory Letter, the Recipient confirms that it is authorizing such persons to accept Secure Identification Credentials (SIDC) and to deliver the Applications and supporting documents to the Association by electronic means. The Recipient may continue to exercise the option of preparing and delivering Applications in paper form. The Association reserves the right and may, in its sole discretion, temporarily or permanently disallow the electronic delivery of Applications by the Recipient. By designating officials to use SIDC and by choosing to deliver the Applications electronically, the Recipient confirms through the authorized signatory letter its agreement to: (a) abide by the Terms and Conditions of Use of Secure Identification Credentials in connection with Use of Electronic Means to Process Applications and Supporting Documentation, available in the Association's public website at https://worldbank.org and "Client Connection"; and (b) to cause such official to abide by those terms and conditions.

#### II. Financial Reports and Audits

- (i) Financial Reports. The Recipient must prepare and furnish to the Association not later than forty-five (45) days after the end of each calendar semester, interim unaudited financial reports ("IFR") for the Project covering the semester. Where a UN agency is contracted by the Recipient, the Recipient is responsible to ensure that the financial reporting requirements applicable to the UN Agency are stipulated in the agreement between the Recipient and the UN agency and met in a timely manner.
- (ii) Audits. Each audit of the Financial Statements must cover the period of one fiscal year of the Recipient, commencing with the fiscal year in which the first withdrawal was made. The audited Financial Statements for each such period must be furnished to the Association not later than six (6) months after the end of such period. Where a UN agency is contracted by the Recipient, the Recipient is responsible to ensure that the documentation requirements applicable to the UN agency, for project audit purposes, are stipulated in the agreement between the Recipient and the UN agency

#### III. Other Information.

For additional information on disbursement arrangements, please refer to the Loan Handbook available on the Association's website (http://www.worldbank.org/) and "Client Connection". The Bank recommends that you register as a user of "Client Connection". From this

website you will be able to prepare and deliver Applications, monitor the near real-time status of the Grant, and retrieve related policy, financial, and procurement information.

For more information about the website and registration arrangements, or if you have any queries in relation to the above, please contact the Bank by email at <a href="mailto:Askloans@worldbank.org">Askloans@worldbank.org</a>.

vours sincerely,

By:

Idah Z. Fswarayi-Riddihough Country Director for Mozambique East and Southern Africa Region

- Attachments1. Form of Authorized Signatory Letter2. Statement of Expenditures (SOE)

#### **Schedule 1: Disbursement Provisions**

| Basic Information                                   |           |                                  |   |                     |                                      |  |  |  |  |  |
|---|-----------|----------------------------------|---|---------------------|--------------------------------------|--|--|--|--|--|
| Grant<br>Numbers                                    | D958-MZ   | Country                          | Republic of Mozambique  | Closing Data        | Section III.B.2 of Schedule 2 to the |  |  |  |  |  |
|   |           | Recipient                        | Ministry of Economy and Finance   | <b>Closing Date</b> | Grant Agreement.                     |  |  |  |  |  |
|   |           |                                  | Additional Financing for the COVID-   | Disbursement        |                                      |  |  |  |  |  |
| Numbers   |           | Name of the Project              | 19 Strategic Preparedness and   | Deadline Date       | Four months after the closing date.  |  |  |  |  |  |
|   |           |                                  | Response Project  | Subsection 3.7      | **                                   |  |  |  |  |  |
| Disbursement Methods and Supporting Documentation   |           |                                  |   |                     |                                      |  |  |  |  |  |
| Disbursemen   | t Methods | Methods                          | porting Documentation   |                     |                                      |  |  |  |  |  |
| Section 2   | ? (**)    |                                  | Subsections 4.3 and 4.4 (**)  |                     |                                      |  |  |  |  |  |
| Direct Payment                                      |           | Yes                              | Copy of records   |                     |                                      |  |  |  |  |  |
| Reimbursement                                       |           | Yes                              | Statement of Expenditure (SOE) in the format provided in Attachment 2 of the DFIL |                     |                                      |  |  |  |  |  |
| Designated Account                                  |           | Yes                              | Statement of Expenditure (SOE) in the format provided in Attachment 2 of the DFIL |                     |                                      |  |  |  |  |  |
| Special Commit                                      | ments     | Yes                              | Copy of Letter of Credit  |                     |                                      |  |  |  |  |  |
|   |           |                                  | Designated Account (Sections 5 and 6 *  | *)                  |                                      |  |  |  |  |  |
| Type Segregated Account                             |           |                                  | Ceiling   | Fixed               |                                      |  |  |  |  |  |
| Financial Institution -<br>Name                     |           | DA-C open at Banco de Moçambique |   | Currency            | USD                                  |  |  |  |  |  |
| Frequency of Reporting Subsection 6.3 (**)  Monthly |           |                                  |   | Amount              | DA-C US\$ 5,000,000                  |  |  |  |  |  |
| Minimum Value of Applications (subsection 2.5)      |           |                                  |   |                     |                                      |  |  |  |  |  |

#### **Minimum Value of Applications (subsection 3.5)**

The minimum value of applications for Direct Payments, Reimbursement, and Special Commitment is USD 1,000.00 equivalent.

**Authorized Signatures** (Subsection 3.1 and 3.2 \*\*) The form for Authorized Signatories Letter is provided in Attachment 1 of this letter Withdrawal and Documentation Applications (Subsection 3.3 and 3.4 \*\*)

#### i) Authorized Signatures and (ii) Applications

The address for the new ASL letter AND the Withdrawal Applications and its supporting documentation will be electronically sent via the Bank's system *Client Connection*.

The World Bank, Loan Department, Delta Center, 13<sup>th</sup> Floor, Upper Hill, Menengai Road, P.O. Box 30577 - 00100 Nairobi, Kenya. Tel: 254 20 2936 000

#### **Additional Information Instructions**

DA-C is to be handled by the PIU and the Bank Account will be shared with DA-A under IDA D8250-MZ and DA-B under GFF TF-B5668-MZ

In case of expenditure related to any category in the table under Schedule 2 Section III.A ("Withdrawal Table") of the Grant Agreement, payments to UN Agencies (if any) may be made through UN Advances (with or without a UN Commitment) disbursement mechanism. In case of a contract with a UN Agency requiring a UN Commitment, an application for issuance of UN Commitment is to be submitted by the Recipient/Borrower. Subsequent payments and documentation of expenditures under the contract must be made in accordance with the Commitment letter to be issued by the Association and the contract between the Borrower/Recipient and the UN agency. In case of a UN Advance (without UN Commitment), documentation of expenditure should be made once the final invoice is issued and based on the UN Financial Report

#### Other

Funds from the Designated Account may be transferred to Single Treasury Account (CUT) in local currency, for the payment of eligible expenditures as and when required. Transfers should be made as and when required to avoid exchange rate losses.

<sup>\*\*</sup> Sections and subsections relate to the "Disbursement Guidelines for Investment Project Financing", dated February 2017.

#### Form of Authorized Signatory Letter

[Letterhead]
Ministry of Economy and Finance
[Street address]
[City] [Country]

[DATE]

International Development Association 1818 H Street, N.W. Washington, D.C. 20433 United States of America

#### Re: Grant No. D958-MZ (Additional Financing for the Mozambique COVID-19 Strategic Preparedness and Response Project)

| Attention:      | , Country Director   |
|-----------------|--|
| I refer         | to the Financing Agreement ("Agreement") between the International   |
| Development     | Association (the "Association") and Republic of Mozambique (th   |
| "Recipient"), o | ated, providing the above Grants. For the purposes of Section 2.0  |
| of the General  | Conditions as defined in the Agreement, any 1[one] of the persons whos   |
|                 | specimen signatures appear below is authorized on behalf of the Recipier tions for withdrawal [and applications for a special commitment] unde |

For the purpose of delivering Applications to the Association, including by electronic means, <sup>2</sup>[each] of the persons whose authenticated specimen signatures appears below is authorized on behalf of the Recipient, acting <sup>3</sup>[individually] <sup>4</sup>[jointly], to deliver Applications, and evidence in support thereof on the terms and conditions specified by the Association.

<sup>&</sup>lt;sup>1</sup> Instruction to the Recipient: stipulate if more than one person needs to sign Applications, and how many or which positions, and if any thresholds apply. *Please delete this footnote in final letter that is sent to the Association*.

<sup>&</sup>lt;sup>2</sup> Instruction to the Recipient: stipulate if more than one person needs to *jointly* sign Applications, if so, please <u>indicate the actual number</u>. *Please delete this footnote in final letter that is sent to the Association*.

<sup>&</sup>lt;sup>3</sup> Instruction to the Recipient: use this bracket if any one of the authorized persons may sign; if this is not applicable, please delete. *Please delete this footnote in final letter that is sent to the Association*.

<sup>&</sup>lt;sup>4</sup> Instruction to the Recipient: use this bracket <u>only</u> if several individuals must jointly sign each Application; if this is not applicable, please delete. *Please delete this footnote in final letter that is sent to the Association*.

This Authorization replaces and supersedes any Authorization currently in the Association records with respect to this Agreement.

| [Name], [position] | Specimen Signature: |
|--------------------|---------------------|
| [Name], [position] | Specimen Signature: |
| [Name], [position] | Specimen Signature: |
|                    |                     |
|                    | Yours truly,        |
|                    | / signed /          |
|                    |                     |
|                    | [Position]          |

### **SOE Model Template (incl. listing of prior review payments)**

# IBRD – International Bank for Reconstruction and Development/IDA – International Development Association Statement of Expenditures

|                                 |         |    |  |            |  |   | Financier         |  |
|---------------------------------|---------|----|--|------------|--|---|-------------------|--|
| Payment made during the         | t       | to |  |            |  |   | Loan/Credit/Grant |  |
| period from                     |         |    |  |            |  |   | #                 |  |
|                                 |         |    |  |            |  | _ | Application #     |  |
| The following expenditures h    | Yes     | No |  | Category # |  |   |                   |  |
| financing period (please tick)  |         |    |  |            |  |   |                   |  |
| The following expenditures h    | Yes     | No |  | Page #     |  |   |                   |  |
| of the loan/credit/grant (pleas | e tick) |    |  |            |  |   |                   |  |

|                |                        |   |  |   |   |                           |                           |   |  |  | ONLY for the<br>Designated Account |   |  |  |  |
|----------------|------------------------|---|--|---|---|---------------------------|---------------------------|---|--|--|------------------------------------|---|--|--|--|
| 1              | 2                      | 3   | 4  | 5   | 6   | 7                         | 8                         | 9   | 10                                       | 11   | 12 13 14                           |   |  |  |  |
| Ite<br>m<br>No | Suppli<br>er's<br>Name | Brief<br>Descrip<br>tion of<br>the<br>Expend<br>iture | Prior<br>Review<br>(Contr<br>act?)<br>(YES or<br>NO) | Contr<br>act #<br>(Client<br>Conne<br>ction #<br>for<br>Prior<br>Review<br>Contra<br>cts) | Contra ct Curren cy and Amoun t  (Origin al + Amend ment) | Invoi<br>ce<br>Num<br>ber | Date<br>of<br>Paym<br>ent | Total Amoun t of Invoice Covere d by Applic ation (Net of Retenti on) | %<br>Finan<br>ced<br>from<br>the<br>Bank | Eligi<br>ble<br>Amo<br>unt<br>(Col<br>9 x<br>10) | Excha<br>nge<br>Rate               | Date of<br>Withdr<br>awal<br>from<br>the<br>Design<br>ated<br>Accoun<br>t | Amoun t Withdr awn from the Design ated Accoun t (Col 11/12) |  |  |
|                |                        |   |  |   |   |                           |                           |   |  |  |                                    |   | /  |  |  |
|                |                        |   |  |   |   |                           |                           |   |  |  |                                    |   |  |  |  |
|                |                        |   |  |   |   |                           |                           |   |  |  |                                    |   |  |  |  |
|                |                        |   |  |   |   |                           |                           |   |  |  |                                    |   |  |  |  |
|                |                        |   |  |   |   |                           |                           |   |  |  |                                    |   |  |  |  |
|                |                        |   |  |   |   |                           |                           |   |  |  |                                    |   |  |  |  |
|                |                        |   |  |   |   |                           |                           |   |  |  |                                    |   |  |  |  |
|                | •                      |   | •  | •   | •   | •                         | •                         | 0.00  |  | 0.00   |                                    | TOTAL   | 0.00   |  |  |

Supporting documents for this SOE are retained at

(insert location)

A separate form should be used for each category.