

Date: 08/26/2021

His Excellency Issa Doubragne  
Minister of Economy and Development Planning  
B.P. 286  
N'Djamena  
Republic of Chad

**Re: Health System Performance Strengthening Project  
IDA Grant D807-TD  
Additional Instructions: Disbursement and Financial Information Letter.**

Excellency:

I refer to the Financing Agreement between Republic of Chad (the “Recipient”) and the International Development Association (the “Association”) for the above-referenced Project. The General Conditions, as defined in the Financing Agreement, provide that the Recipient may from time to time request withdrawals of Grant amount from the Grant Accounts 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 <https://www.worldbank.org> and its secure website “Client Connection” at <https://clientconnection.worldbank.org>. 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, and conditions, 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.

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

The Association may permit the Recipient to electronically deliver applications (with supporting documents) through the Association’s web-based portal (<https://clientconnection.worldbank.org>) “Client Connection”. This option may be effected 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.

*(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.

## **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 Association 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, please contact the Association by email at [clientconnection@worldbank.org](mailto:clientconnection@worldbank.org). 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 [askloans@worldbank.org](mailto:askloans@worldbank.org).

Yours sincerely,

*Joelle Dehasse p.i.*

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Clara Ana Coutinho de Sousa  
Country Director for Chad  
Africa Region

**Attachments**

1. Form of Authorized Signatory Letter
2. Statement of Expenditure (SOE)
3. SOE for PBF

copies:                   Ministère des Finances

Unité de Coordination du Projet REDISSE IV  
BP 440  
N'Djamena, Tchad  
e-mail: garbaredisse4@gmail.com

**Schedule 1 : Disbursement Provisions**

<b>Basic Information</b>					
<b>Grant Number</b>	<b>D807-TD</b>	<b>Country</b>	Republic of Chad	<b>Closing Date</b>	Section III.B.2. of Schedule 2 to the Financing Agreement.
		<b>Recipient</b>	Ministry of Economy and Development Planning		
		<b>Name of the Project</b>	Health System Performance Strengthening Project	<b>Disbursement Deadline Date</b>	Four months after the closing date.
<i>Subsection 3.7 **</i>					
<b>Disbursement Methods and Supporting Documentation</b>					
<b>Disbursement Methods</b> <i>Section 2 (**)</i>	<b>Methods</b>	<b>Supporting Documentation</b> <i>Subsections 4.3 and 4.4 (**)</i>			
Direct Payment	Yes	Copy of records			
Reimbursement	Yes	<ul style="list-style-type: none"> <li>Category 1&amp; 3: Statement of Expenditure (SOE) in the format provided in Attachments 2</li> <li>Category 2: Customized Statement of Expenditure for expenditure in the format provided in Attachment 3 of the DFIL.</li> </ul>			
Designated Account	Yes	<ul style="list-style-type: none"> <li>Category 1&amp; 3 Statement of Expenditure (SOE) in the format provided in Attachments 2</li> <li>Category 2: Customized Statement of Expenditure for expenditure in the format provided in Attachment 3 of the DFIL.</li> </ul>			
Special Commitments	Yes	Copy of Letter of Credit			
<b>Designated Account (Sections 5 and 6 **)</b>					
<b>Type</b>	Joint Account with GFF Grant		<b>Ceiling</b>	Fixed	
<b>Financial Institution – Name</b>	Société Générale du Tchad, SGT		<b>Currency</b>	CFAF	
<b>Frequency of Reporting</b> <i>Subsection 6.3 (**)</i>	Monthly		<b>Amount</b>	CFAF 3,500,000,000 Amount based on 4 months projected expenditures of which IDA share amounts to CFAF 2,958,000,000	
<b>Minimum Value of Applications (subsection 3.5)</b>					
The minimum value of applications for Reimbursement, Direct Payment and Special Commitment Issuance is 20 percent of the outstanding Designated Account Advance.					
<b>Authorized Signatures (Subsection 3.1 and 3.2 **) The form for Authorized Signatories Letter is provided in Attachment 1 of this letter</b>					
<b>Withdrawal and Documentation Applications (Subsection 3.3 and 3.4 **)</b>					
A letter in the Form attached (Attachment 2) should be furnished to the World Bank at the address indicated below providing the name(s) and specimen signature(s) of the official(s) authorized to sign Applications:					

The World Bank  
Resident Mission  
Bamako, Mali  
Attention: Clara Ana Coutinho de Sousa, Country Director

All Withdrawal Applications and its supporting documentation will be electronically sent via the World Bank's web Portal Client Connection

**Additional Instructions**

Disbursements under Category 3 of Section III.A of Schedule 2 of the Financing Agreement Contingent Emergency Response Component (CERC) will be subject to the conditions precedent to accessing the CERC funds, namely that the Recipient has provided, and the Bank has accepted, evidence of the occurrence of an eligible crisis or emergency and the Recipient has prepared and adopted/adhered to the CERC Operations Manual. Disbursements under this component will follow procedures described in the CERC Manual including supporting documentation; provided that this disbursement letter will first need to be amended and reinstated at a later date to reflect those specific arrangements. In order to provide necessary liquidity for fast response, the ceiling of the Advance under the CERC could be up to 100% of the amount allocated to the CERC category.

**Attachment 1 – Form of Authorized Signatory Letter**

[Letterhead]  
Ministry of 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. D807-TD (Health System Performance Strengthening Project)**

Attention: Ms Clara Ana Coutinho de Sousa, *Country Director*

I refer to the Grant Agreement (“Agreement”) between the International Development Association (the “Association”) and the Republic of Chad (the “Recipient”), dated \_\_\_\_\_, providing the above Grant. For the purposes of Section 2.03 of the General Conditions as defined in the Agreement, any <sup>1</sup>[one] of the persons whose authenticated specimen signatures appear below is authorized on behalf of the Recipient to sign applications for withdrawal [and applications for a special commitment] under this Grant.

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.

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

[Name], [position]      Specimen Signature: \_\_\_\_\_

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

<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>4</sup> Instruction to the Recipient: use this bracket only 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.*

[Name], [position]

Specimen Signature: \_\_\_\_\_

[Name], [position]

Specimen Signature: \_\_\_\_\_

Yours truly,

/ signed /

\_\_\_\_\_

**Attachment 2 – Statement of Expenditures category 1&3**

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

**IDA Grant no.      GFF Grant No.  
Statement of Expenditures**

Payment made during the period from  to

The following expenditures have been incurred during the retroactive financing period (please tick)  
The following expenditures have been incurred before the closing date of the loan/credit/grant (please tick)

Yes	No
Yes	No

Financier	
Loan/Credit/Grant #	
Application #	
Category #	
Page #	

1	2	3	4	5	6	7	8	9	10	11	12	13	14
Item No	Supplier's Name	Brief Description of the Expenditure	Prior Review (Contract?) <i>(YES or NO)</i>	Contract # <i>(Client Connection # for Prior Review Contracts)</i>	Contract Currency and Amount <i>(Original + Amendment)</i>	Invoice Number	Date of Payment	Total Amount of Invoice Covered by Application <i>(Net of Retention)</i>	% Financed from the Bank	Eligible Amount <i>(Col 9 x 10)</i>	Exchange Rate	Date of Withdrawal from the Designated Account	Amount Withdrawn from the Designated Account <i>(Col 11/12)</i>
									0.00			TOTAL	0.00

Supporting documents for this SOE are retained at \_\_\_\_\_  
*(insert location)*



**Attachment 3 – Customized Statement of Expenditure category 2**

IDA Grant No.    GFF Grant No. \_\_\_\_\_  
**Customized Statement of Expenditures for PBF Payments of the Project**

Category \_\_\_\_\_  
 Period: DD/MM/YY to DD/MM/YY

**The World Bank**  
**APPLICATION FOR WITHDRAWAL**  
**STATEMENT OF EXPENDITURES – CUSTOMIZED**  
**(SOE)<sup>1</sup>**

1	2	3	4	5	6	7	8	9	10	11
Item No.	Name and Address of Beneficiary	Agreement No. & Date (or other ref.)	Brief Description of Activities	Currency and Total Amount of Package of Health Service	Amount covered by application	Elig. %	Payment request Eligible for Financing	Amount Paid from Designated Account	Date of Payment	Remarks
				TOTALS						

<sup>1</sup> Supporting documents for this Customized SOE retained at:(insert location)

