

REPÚBLICA DE MOÇAMBIQUE MINISTÉRIO DA SAÚDE

Maputo,	/	2020
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To: The Global Fund to Fight AIDS, Tuberculosis and Malaria Attn: Kirsi Visaiinen Global Health Campus Chemin du Pommier 40 1218 Grand-Saconnex, Geneva, Switzerland

Re: Mozambique - Ministry of Health (the "Principal Recipient")

Dear Kirsi Visaiinen

With respect to any legally-binding document to be signed between the Principal Recipient and the Global Fund to Fight AIDS, Tuberculosis and Malaria (the "Global Fund"), or issued by the Principal Recipient, or any other document or notice, in connection with any grant(s) made by the Global Fund to the Principal Recipient (each a "Grant", and together, the "Grants"):

- A. I, acting as a duly authorized representative of the Principal Recipient, hereby confirm that each¹ person whose specimen signature appears in one or more of sections 1, 2 and 3 below:
- (i) is authorized on behalf of the Principal Recipient for the specific purpose indicated; and
- (ii) holds the office specified next to such person's name and that each specimen signature included below constitutes each such person's current, and genuine signature.
 - B. I, acting as an authorized representative of the Principal Recipient, hereby confirm that:
- the official name² of the Principal Recipient is Ministry of Health;
- (ii) the Principal Recipient is either a sovereign state or an entity with independent legal personality validly existing under the laws of the jurisdiction in which it was formed or registered;

¹ If requests for disbursement must be signed by more than one person to be effective, this letter must clearly state so. If authorized signatories are divided into two groups, and the signature of a person from each group is required, this must also be clearly stated. If any authorized signatory for the purpose of signing legally-binding documents will also be an authorized signatory for requests for disbursement, his or her name, title and specimen signature must also be listed in this letter for that specific purpose.

² The official name of the Principal Recipient is the name of the Principal Recipient that appears on all official or legal documents, such as registrations, constitutional documents and contracts. Please attach a copy of the document which evidences the official name of the Principal Recipient to this letter (e.g. certificate of incorporation, articles of association, registration certificate or trust deed) or a letter signed by an authorized person of the Principal Recipient confirming the official name of the Principal Recipient. The official name of the Principal Recipient should be specified in English. Please consult further with the Country Team, if you are proposing to specify an official name in French or Spanish.

- the Principal Recipient has all the necessary power and as relevant, has been duly authorized by all necessary consents, actions, approvals and authorizations to execute and deliver each legally-binding document to be signed between the Principal Recipient and the Global Fund, or issued by the Principal Recipient, or any other document or notice, in connection with any Grant made by the Global Fund to the Principal Recipient, and to perform all its obligations under such document or notice (together, the "legally-binding documents");
- (iv) each person specified in section 1 below is duly authorized to jointly and severally sign legallybinding documents on behalf of the Principal Recipient;
- (v) each person specified in section 2 below is duly authorized to jointly and severally sign and make requests for disbursement on behalf of the Principal Recipient; and
- (iv) the person specified in section 3 below is duly authorized to be the organization representative for notices for each of the Grants on behalf of the Principal Recipient.

C. I hereby:

- (i) revoke, as from the date hereof, all previous confirmation letters regarding the subject matter of this letter;
- (ii) confirm that this letter supersedes any other written agreement or communication between the parties to this letter regarding its subject matter;
- (iii) acknowledge and agree that the Global Fund may at any time require; (a) further evidence of due authorization of my or any other persons' authority to sign, represent or act on behalf of the Principal Recipient; (b) proof of identification for myself or any other person to authenticate the relevant signature provided below; and (c) further evidence supporting any matter referred to in, or in connection with this letter;
- (iv) confirm that I have read and understood the <u>Global Fund Privacy Statements</u>, including the supplemental statement for Global Fund Grant Funding and Management Activities, on the Global Fund website <u>(https://www.theglobalfund.org/en/legal/privacy-statement/;</u> and
- (v) confirm that I have read and understood, and undertake to comply with, the Global Fund <u>Code</u> of <u>Conduct for Recipients of Global Fund Resources</u>.

Yours sincerely

Name: Prof. Docto Armado Daniel Tiago

Title: Minister of Healt