



UNITED STATES OF AMERICA

PDFCX 878



AGENCY FOR INTERNATIONAL DEVELOPMENT
REGIONAL ECONOMIC DEVELOPMENT SERVICES OFFICE WEST AND CENTRAL AFRICA

UNITED STATES ADDRESS
ABIDJAN (REDSO)
DEPARTEMENT OF STATE
WASHINGTON, D C 20523-2010

INTERNATIONAL ADDRESS
REDSO / WCA
C/O AMERICAN EMBASSY
01 BP 1712 ABIDJAN 01
COTE D'IVOIRE

September 30, 1991

Mr. C. Payne Lucas
Executive Director
AFRICARE
Africare House
440 R Street, N.W.
Washington, D.C. 20001

Subject: Grant 624-0007-G-SS-1085-00

Dear Mr. Lucas:

Pursuant to the authority contained in the Foreign Assistance Act of 1961, as amended, the Agency for International Development (hereinafter referred to as "A. I. D." or "Grantor") hereby grants to AFRICARE, (hereinafter referred to as "Grantee"), the sum of \$400,000 to provide partial support for the "Ivermectin Delivery Program for the Prevention of the Recurrence of Onchocerciasis in Nigeria Project," as described the Schedule of this grant and the Attachment 2, entitled "Program Description."

This Grant is effective as of September 1, 1991, and obligation is made as of the date of this letter and shall apply to commitments made by the Grantee in furtherance of project objectives during the period beginning with the effective date and ending August 31, 1994.

The total estimated amount of the program is \$419,333, of which \$400,000 is hereby obligated. A.I.D. shall not be liable for reimbursing the Grantee for any costs in excess of the obligated amount. However, A.I.D. may provide additional funds during the Grant period up to the total estimated amount of the program. It is anticipated that the obligated amount will be sufficient through approximately June 15, 1994.

This Grant is made to AFRICARE on condition that the funds will be administered in accordance with the terms and conditions as set forth in Attachment 1 entitled the Schedule, Attachment 2 entitled "Program Description", and Attachment 3 entitled "Standard Provisions and Optional Standard Provisions for U.S., Non-governmental Grantees," which have been agreed to by your organization.

Please sign the original and each copy of this letter to acknowledge your receipt of the grant, and return the original and all but one copy (which you may keep for your records) to the A.I.D. Grant Officer indicated below at REDSO/WCA/Office of Procurement (AID); Department of State; Washington, D.C. 20521-2010.

Sincerely,



Steven G. Wisecarver
Grant Officer

Attachments:

1. Schedule
2. Program Description
3. Mandatory Standard Provisions, and
Optional Standard Provisions for U.S., Non-governmental
Grantees

ACKNOWLEDGED:

AFRICARE

By : C. Payne Lucas
Title : Executive Director
Date : October 9, 1991

FISCAL DATA

Appropriation	: 72-1111021.8
Budget Plan Code	: GDHA-91-21620-IG13
RCN	: B120027
PIO/T No.	: 620-0007-3-10020
Project No.	: 620-0007
Total Estimated Amount:	: \$419,333
Total Obligated Amount:	: \$400,000
C.E.C. Number:	: 07-482-5894
Letter of Credit No.	: 72-00-1303
Paying Office	: FA/FM/CMP/LC
Technical Office	: AAO/Lagos
Technical Officer	: Rudolph Thomas/PRO/AAO/Lagos

SCHEDULE

A. Purpose of Grant

The purpose of this Grant is to provide support for a program entitled: "Ivermectin Delivery Program for the Prevention of the Recurrence of Onchocerciasis in Nigeria," This program is outlined in Attachment 2 of this Grant entitled "Program Description," and more specifically described in AFRICARE's application dated March 8, 1991, as amplified in May, 1991, which is hereby incorporated into and made a part of this Grant. In case of any inconsistency between the grantee's application and this Schedule, the latter shall take precedence.

B. Period of Grant

1. The effective date of this Grant is September 1, 1991. The expiration date of this Grant is August 31, 1994.
2. Funds obligated hereunder are available for program expenditures for the estimated period September 1, 1991 to June 15, 1994, as shown in the Grant budget below.

C. Amount of Grant and Payment

1. The total estimated amount of this Grant for the period shown in B.1 above is \$419,333.
2. A.I.D. hereby obligates the amount of \$ 400,000 for program expenditures during the period set forth in B.2 above and as shown in the Grant Budget below.
3. Payment shall be made to the grantee in accordance with procedures set forth in Attachment 3 Optional Standard Provision 1, entitled "Payment - Letter of Credit."
4. Additional funds up to the total amount of the Grant shown in C.1 above may be obligated by A.I.D. subject to the availability of funds, and to the requirements of the Mandatory Standard Provision of the Grant, entitled "Revision of Grant Budget."

d. Grant Budget

The following is the Grant Budget, including local cost financing items, if authorized. Revisions to this budget shall be made in accordance with Standard Provision of the Grant, entitled "Revision of Grant Budget."

GRANT BUDGET
(09/01/91)-(08/31/94)

<u>CATEGORIES</u>	<u>AID CONTRIBUTION</u>
I. SALARIES	\$150,355
II. BENEFITS	20,521
III. TRAVEL	71,070
IV. TRAINING	2,200
V. OTHER DIRECT COSTS	44,550
VI. EQUIPMENT	12,900
VII. SUPPLIES	10,470
VIII. CONSTRUCTION	-0-
IX. INDIRECT COSTS	107,267
	=====
X. TOTAL ESTIMATED AMOUNT (AID)	\$419,333
<u>TOTAL AFRICARE CONTRIBUTION</u>	\$140,667
	=====
<u>TOTAL ESTIMATED PROGRAM COST</u>	\$560,000

E. Reporting and Evaluation

1. Monitoring and Reporting Program Performance:

a. The Grantee shall monitor the performance under the Grant and, where appropriate, ensure that time schedules are being met, project work units by time periods are being accomplished, and other performance goals are being achieved. This review shall be made for each program, function or activity as set forth in this grant.

b. The Grantee shall submit a performance report (technical report) that briefly presents the following information for each program, function or activity involved:

i. A comparison of actual accomplishments with the goals established for the period, the findings of the investigator, or both. If the output of programs can be readily quantified, such quantitative data should be related to cost data for computation of unit costs.

ii. Reasons why established goals were not met.

iii. Other pertinent information including, when appropriate, analysis and explanation of cost overruns or high unit costs.

c. The Grantee shall submit the performance or technical reports to A.I.D. and the Financial Status Reports covering the same period in the frequency established for the Financial Reporting of this Grant. A final performance or technical report shall be submitted within sixty days after the expiration date of this Grant.

d. Between the required performance reporting dates, events may occur that have significant impact upon the program. In such instances, the Grantee shall inform A.I.D. as soon as the following types of conditions become known:

i. Problems, delays, or adverse conditions that will materially affect the ability to attain program objectives, prevent the meeting of time schedules and goals, or preclude the attainment of work units by established time periods. This disclosure shall be accompanied by a statement of the action taken, or contemplated, and any A.I.D. assistance needed to resolve the situation.

ii. Favorable developments or events that enable time schedules to be met sooner than anticipated or more work units to be produced than originally projected.

e. If any performance review conducted by the Grantee discloses the need for change in the budget estimates the Grantee shall submit a request for budget revision.

f. All reports shall be submitted to:

Grant Officer
REDSO/WCA/OP
Washington, D.C. and
20521-2010

Project Officer
AAO/Lagos
Washington, D.C.
20521-8300

F. Financial Reporting

(1) Financial Status Report

This paragraph describes uniform reporting procedures for grantees to: summarize expenditures made and A.I.D. funds unexpended, report the status of A.I.D. cash advanced, request advances and reimbursement when the letter of credit method is not used; and promulgates standard forms incident thereto.

(a) The grantee shall use the standardized Financial Status Report, SF 269, to report the status of funds for all nonconstruction programs.

(b) The report shall be on an accrual basis. If the grantee's accounting records are not normally kept on the accrual basis, the grantee shall not be required to convert its accounting system, but shall develop such accrual information through best estimates based on an analysis of the documentation on hand.

(c) The report shall be required quarterly only. A final report shall be required at the completion of the Grant Grant.

(d) The grantee shall submit the Financial Status Report (original and two copies) no later than 30 days after the completion of the design phase under this Grant.

(2) Federal Cash Transactions Report

(a) The grantee shall submit a Federal Cash Transactions Report and its continuation form (SF 272 and 272A) for all funds advanced to the grantee through either a letter of credit or periodic Treasury check. A.I.D. will use this report to monitor cash advanced to the grantee and to obtain disbursement information for the Grant from the grantee.

(b) The grantee shall forecast Federal cash requirements in the "Remarks" section of the report.

(c) The grantee shall report in the "Remarks" section the amount of cash advances in excess of three days' requirements in the hands of subgrantees and the amount of cash advances in excess of 30 days' requirements in the hands of non-U.S. subgrantees. The grantee shall provide short narrative explanations of actions taken by the grantee to reduce the excess balances.

(d) Recipients shall submit not more than an original and one copy of the Federal Cash Transactions Report within 15 working days following the end of each quarter.

(3) Request for Advance or Reimbursement

(a) The Request for Advance or Reimbursement, SF 270, shall be a standardized form for all nonconstruction programs when letter of credit or periodic treasury check advance methods are not used.

(b) Recipients are authorized to submit requests for advances and reimbursement at least monthly when letters of credit and periodic Treasury check advances are not used. Recipients are not required to submit more than the original and two copies of the request for Advance or Reimbursement.

(4) The grantee shall submit copies of all documents sent to FA/FM/CMP/LC, AID/Washington, 20523 to:

Controller
REDSO/WCA/WAAC
01 B.P. 1712
Abidjan 01,
Cote d'Ivoire

Project Officer
AAO/Lagos
Washington, D.C.
20521-8300

F. Indirect Cost Rate

Pursuant to Clause No. 13 entitled, "Negotiated Indirect Cost Rates - Provisional," of the Optional Standard Provisions of this Grant, an indirect cost rate or rates shall be established for each of the grantee's accounting periods which apply to this Grant. Pending establishment of revised provisional or final indirect cost rates for each of the grantee's accounting periods which apply to this Grant, provisional payments on account of allowable indirect costs shall be made on the basis of the following negotiated provisional rate(s) applied to the base which is (are) set forth below:

<u>Type</u>	<u>From</u>	<u>To</u>	<u>Level I (a)</u>	<u>Level II (b)</u>
Provisional	7-1-91	Until Amended	35.71	17.86

a/ Personnel, Travel and Allowances, Training and Other Direct Costs

b/ Supplies, Equipment and Construction Costs

G. Title to Property

Standards provisions related to title to and use of property are included in Attachment 3, Optional Standard Provisions, 22, "Title to and Use of Property (Cooperating Country Title)" (November 1985).

H. Authorized Geographic Code

The grantee shall procure goods and services financed by this Grant in accordance with Attachment 3, Optional Standard Provisions, 6. "Procurement of Goods and Services" (November 1985) and 7. "A.I.D. Eligibility Rules for Goods and Services" (November 1985). All goods and services shall have their source origin and nationality only in A.I.D. Geographic Code 000, except as specifically approved by the A.I.D. Grant Officer or as A.I.D. may otherwise agree in writing.

I. Special Provisions

1. Medical Clearances: All of the grantee's personnel must be medically fit for service in Nigeria and have SOS/Medevac insurance in place prior to their arrival in the country.

2. Logistical Support: All other logistical support shall be provided or arranged for by the grantee.

3. Relationships and Responsibilities:

a. The AFRICARE Country Representative will be the Project Manager for the Nigeria River Blindness Project and will report to AAO/Lagos Program Officer, Rudolph Thomas.

b. Cooperating Country Officials: The AFRICARE Country Representative will liaise with Dr. A. Sorungbe, Director of Primary Health Care, Federal Ministry of Health, and with the Minister of the Gongola State Ministry of Health.

J. Standard Provisions

The Mandatory Standard Provisions For U.S., Nongovernmental Grantees and the following Optional Standard Provisions For U.S., Nongovernmental Grantees found in Attachment 3 are applicable to this Grant :

1. Payment - Letter of Credit
4. Air Travel and Transportation
5. Ocean Shipment of Goods
6. Procurement of Goods and Services
7. AID Eligibility Rules for Goods and Services
8. Subagreements
9. Local Cost Financing
10. Patent Rights
11. Publications
13. Negotiated Indirect Cost Rates - Provisional
14. Regulations Governing Employees
22. Title To and Care of Property (Cooperating Country Title)
23. Cost Sharing (Matching)
25. Conversion of United States Dollars to Local Currency
26. Drug Free Workplace
27. Disclosure of Lobbying Activities

End of ATTACHMENT 1

PROGRAM DESCRIPTION

I. OBJECTIVE

The objective of this Grant with AFRICARE is to undertake a program to prevent the recurrence of onchocerciasis in Nigeria and to assist officials of the Ministry of Health and community groups to establish a Nigerian capacity to monitor, prevent and treat onchocerciasis.

II. BACKGROUND

At present, 19 million men, women and children in 37 countries of Africa, Latin America and the Middle East are afflicted with onchocerciasis; another 85 million people are at risk of being infected. Of those individuals infected it is estimated that more than 350,000 are now blind. Other less dramatic but far more common clinical symptoms of onchocerciasis are complications involving disfiguring skin conditions, swollen lymph nodes, and less severe forms of eye disorders. The complication causing the greatest distress is constant, violent itching of the skin.

The social, economic and cultural consequences of onchocerciasis can be devastating, even where the effects of blindness are not considered. For the individual suffering from this disease, normal daily activities are severely disrupted, sleep is lost and there is a marked decline in general health. Anecdotal evidence suggests that those infected are likely to have a shortened life expectancy due to a general decline in their ability to care for themselves.

At the community level onchocerciasis has dramatically affected whole settlement patterns. Entire villages have been abandoned as residents have fled in fear of infection. Because the disease is most prevalent near watercourses, fertile river valleys have been the worst affected.

During fiscal year 1991, Congress earmarked \$5 million for activities relating to the control, prevention and eradication of River Blindness: \$2.5 million to support the Onchocerciasis Control Program of West Africa; and \$2.5 million to support A.I.D.'s Ivermectin Distribution Program (IDP) in selected countries in Africa and Central America. This second program is intended as a three year pilot effort to assess the feasibility of using PVO's to strengthen the institutional capacity of indigenous health systems to provide cost effective and sustainable delivery of Ivermectin to those selected countries.

Under the aegis of the Onchocerciasis Control Program aerial-larviciding campaigns have successfully eradicated the black fly vector from large areas of West Africa, freeing a generation of children from the threat of infection. Larviciding, however, is not a strategy suited for the long-term control of onchocerciasis. Within the OCP the high cost of sustaining the larviciding campaign has increased the pressure to find alternative interventions for the control of onchocerciasis; and in many other areas of Africa and Latin America the remoteness of the endemic areas and protective jungle canopies severely limit aerial-larviciding. The anti-microfilarial drug, ivermectin, represents a significant advancement in efforts to develop an alternative control strategy.

Extensive field trials in Africa and Central America have shown ivermectin, when administered once a year, to be a safe and effective treatment for onchocerciasis. While an effective killer of the microfilaria which cause the worst symptoms of onchocerciasis, ivermectin does not kill the adult worms which also infect the patient. The adult worm, which has a life expectancy of 12 years, is unaffected by ivermectin treatment, and within a year, can return microfilarial levels to those found prior to treatment. Thus, for an infected individual, treatment is necessary at least once a year for a minimum of 12 years, or the life of the adult worm.

Because of the protracted need for medical treatment, any ivermectin distribution program must be sustainable. Distribution of ivermectin, however, has been severely hampered by lack of medical services in onchocerciasis-endemic areas. In the remote rural areas most heavily affected by the disease, there is little institutional capability to diagnose the disease, distribute the drug, or carry out the necessary record keeping to ensure proper follow up treatment.

The ultimate goal of this program is to reduce the burden caused by onchocerciasis by increasing the ability of government and non-government health institutions to deliver ivermectin to infected populations. The program is to be implemented thru U.S. PVOs, local NGOs, and other organizations to strengthen the health service capabilities of indigenous institutions. This program is to be:

- implemented within the framework of the host countries' national onchocerciasis control programs; working in concert with the host country Ministry of Health, and private groups (and the OCP, where applicable).
- committed to transferring to indigenous health institutions the technical skills necessary to design, implement and monitor a long-term program of drug delivery.

III. PROGRAM DESCRIPTION - GONGOLA STATE, NIGERIA

The AFRICARE application constitutes a three year pilot program to assess the feasibility of delivering the drug ivermectin to onchocerciasis endemic areas of Gongola State, Nigeria. This pilot program will emphasize working with the Gongola State Ministry of Health, as well as with indigenous NGO's, including the Boy Scouts and Jamet Nasirul Islam, to determine a cost effective and sustainable method of delivery of ivermectin to communities. Emphasis will be placed on strengthening local capabilities in drug distribution, epidemiological surveillance and record-keeping.

The purpose of the ivermectin distribution project as a three year pilot effort is to assess the feasibility of using U.S. Private and Voluntary Organizations (PVOs) to strengthen the institutional capacity of indigenous health systems to provide cost effective and sustainable delivery of ivermectin.

The program is comprised of five objectives:

1. **Health Education:** to develop the capacity of local government and church health services to inform communities about river blindness and ivermectin so as to promote public acceptance of annual mass distribution of ivermectin.
2. **Training of Community-Based Workers (CBWs):** to develop the capacity of local government and church health services to plan and conduct annual training courses for CBWs. Such courses would teach CBWs how to distribute ivermectin and how to manage reactions to the drug.
3. **Supervision of CBWs:** to develop the capacity of local government and church health services to supervise the work of CBWs.
4. **Motiviation of Field Workers:** to work with local government and church officials to develop sustainable strategies for motivating field work. In most cases this will depend upon the LGA or church organization budgeting for the disbursing allowances/incentives to both health professionals and CBW's. In some cases, an LGA, an NGO, or a community may seek to experiment with non-monetary incentives.
5. **Supervision of local health services:** to develop the capacity of the GSMOH to supervise the work done by local government and church health services to mass distribute ivermectin.

To meet these objectives, initially, epidemiological surveys to identify endemic communities through skin snip surveys and appropriate rapid appraisal techniques will be carried out. By the end of the third year, the program plans to survey every rural district in Gongola State where onchocerciasis may be a problem.

In the first year, the program will distribute ivermectin to a minimum of 25,000 people living in heavily infected communities in three separate local Governments Areas in Gongola State. In the remaining two years, at least 50,000 more people will begin treatment with ivermectin. It is anticipated that by the end of three years, a minimum of 75,000 people will have begun an annual treatment of ivermectin.

Project outputs over the course of the three years will minimally include: (1) epidemiological surveys in all rural districts where onchocerciasis may be a problem; (2) training of CBWs in each community where onchocerciasis is a problem; (3) the development of a cadre of supervisors within local government and church health services to supervise the work of CBWs; (4) development of educational materials for the training of all levels of health worker involved in the IDP; (5) development of record keeping capabilities at appropriate levels; (6) design of an adequate and sustainable distribution system for ivermectin tablets; and (7) the demonstration of the capabilities of PVOs to distribute ivermectin on a cost effective, sustainable basis.

Quarterly reports are to be submitted to AAO/Lagos, the Vector Biology and Control Project (VBC) and AID/Washington Project Officer/R&D/H/CD.

RECEIVED
 10 SEP. 1991
CONTROLLER OFFICE
 REDSO/WA

AID 13501
 (387)
 *PIO/T

<p style="text-align: center;">PROJECT IMPLEMENTATION ORDER/TECHNICAL SERVICES</p>	Cooperating Country NIGERIA	Page 1 of 3 Pages 41
	PIO/T No 620-0007-3-10020	<input checked="" type="checkbox"/> Original or Amendment No _____
	4 Project/Activity No and Title 620-0007 Nigeria River Blindness	

DISTRIBUTION

5. Appropriation Symbol 72-1111021.8 (B120027)	6 Budget Plan Code GDHA-91-21620-IG13
7. Obligation Status <input checked="" type="checkbox"/> Administrative Reservation <input checked="" type="checkbox"/> Implementing Document	8 Project Assistance Completion Date (Mo., Day, Yr.)
9. Authorized Agent REDSO/WCA/OP	10 This PIO/T is in full conformance with PRO/AG No Date
11a Type of Action and Governing AID Handbook <input type="checkbox"/> AID Contract (HB 14) <input checked="" type="checkbox"/> AID Grant or Cooperative Agreement (HB 13) <input type="checkbox"/> PASA/RSSA (HB 12) <input type="checkbox"/> Other	11b Contract/Grant/Cooperative Agreement/ PASA/RSSA Reference Number (if this is an Amendment)

WCA/OP
 (inal)
 WCA

12 Estimated Financing (A detailed budget in support of column (2) is attached as Attachment No _____)

Maximum AID Financing Available	A Dollars	(1) Previous Total	(2) Increase	(3) Decrease	(4) Total to Date
					\$400,000
	B US Owned Local Currency				

13 Mission References

14A. Instructions to Authorized Agent
 The Contract Officer is requested to negotiate and award a grant to AFRICARE to fund the attached Nigeria River Blindness proposal.

FUNDS AVAILABLE

DATE: 9/12/91

INITIALS: TM

14B. Address of Voucher Paying Office
West Africa Accounting Center (WAAC); B.P. 1712, Abidjan, Cote d'Ivoire

15 Clearances—include typed name, office symbol, telephone number and date for all clearances

A. The Project Officer certifies that the specifications in the statement of work or program description are technically adequate <i>[Signature]</i> Rudolph Thomas, PRO, AAO/Lagos	Phone No Date 9/5/91	B. The statement of work or program description lies within the purview of the initiating office and approved agency programs. <i>[Signature]</i> Rudolph Thomas, PRO, AAO/Lagos	Date 9/5/91
C. <i>[Signature]</i> Thomas F. Fallon, REDSO/WAAC	Date 9/12/91	D Funds for the services requested are available <i>[Signature]</i> Alan Gordon, Controller, AAO/Lagos	Date 9/6/91
E. Concurrence: <i>[Signature]</i> Frederick E. Gilbert, REDSO Dir.	Date 9/30/91	State 255180 <i>[Signature]</i> Eugene R. Chiavaroli	Date 4/5/91

16 For the Cooperating Country The terms and conditions set forth herein are hereby agreed to

Signature Not Applicable Date _____

Title _____

17 For the Agency for International Development

Signature Eugene R. Chiavaroli Date 4/5/91

Title A.I.D. Affairs Officer

*See HB 3, Sup. A, App C, Att B, for preparation instructions Note: The completed form contains sensitive information whose unauthorized disclosure may subject an employee to disciplinary action

18 Statement of work or program description for this project is described in Attachment No. 1

19 Special Provisions

- A Language Requirements (specify) N/A
(If marked, testing must be accomplished by AID to assure desired level of proficiency)
- B Access to classified information will will not be required by technical specialists (Indicate level) _____
- C Duty post(s) and duration of technical specialist(s) services at post(s) (months) Yola, Gongola State, Nigeria
one year duration
- D Dependents will will not be permitted to accompany technical specialist(s).
- E Geographic code applicable to procurement under this PIO/T is 000 899 935 941 Other (specify) _____
(If other than authorized in HB 1, Sup B, Chap 6, Para 5A1d, attach waiver(s))
- F Salary approval(s) to exceed FS-1 salary ceiling are attached in process N/A.
- G Cooperating country acceptance of this project (applicable to AID/W projects only)
 has been obtained is in process is not applicable to services required by PIO/T.
- H Justification for use of external resources for consulting services is attached N/A.
- I Clearance for procurement of ADP equipment, software, and services is attached in process N/A.
- J OMB approval of any report to be completed by ten or more members of the general public under the statement of work is attached in process N/A.
- K Participant training is is not being funded as part of this PIO/T.
- L Requirement (contracts only) is recommended for small business set aside SBA 8(a) Program neither.
- M Other (specify). N/A

20. Provisions for Logistic Support

A. Specific Items (Insert "X" in applicable column at right. If entry needs qualification, insert asterisk and explain below in C. "Comments")

	IN KIND SUPPLIED BY		FROM LOCAL CURRENCY SUPPLIED BY		TO BE PROVIDED OR ARRANGED BY SUPPLIER	N/A
	AID	COOPERATING COUNTRY	AID	COOPERATING COUNTRY		
(1) Office Space					X	
(2) Office Equipment					X	
(3) Housing and Utilities					X	
(4) Furniture					X	
(5) Household Appliances (Stoves, Refrig, etc.)					X	
(6) Transportation in Cooperating Country					X	
(7) Transportation To and From Country					X	
(8) Interpreter Services/Secretarial					X	
(9) Medical Facilities (Health Room)						X
(10) Vehicles (official)						X
(11) Travel Arrangements/Tickets					X	
(12) Nightwatchman for Living Quarters					X	
(13)						X
(14)						
(15)						

(OTHER SPECIFY

20 Provisions for Logistic Support (Continued)

B. Additional Facilities Available From Other Sources

- Diplomatic pouch N/A PX Commissary N/A
- Other (specify, e.g., duty free, entry, tax exemption) N/A

C. Comments

21. Relationship of Contractor or Participating Agency to Cooperating Country and to AID

A. Relationships and Responsibilities

The AFRICARE Nigeria Country Representative will be Project Manager for the Nigeria River Blindness Project and will report to the AAO/Lagos Program Officer.

B. Cooperating Country Liaison Officials

Minister, Gongola State Ministry of Health

C. AID Liaison Officials

Program Officer, AAO/Lagos

22. Background Information (additional information useful to authorized agent)

23. Summary of attachments that accompany the PIO/T (check applicable boxes)

- A. Detailed budget estimate in support of increased funding (Block 12)
- B. Evaluation criteria for competitive procurement (Block 14A)
- C. Justification for procurement by other than full and open competition or noncompetitive assistance
- D. Statement of work or program description (Block 18)
- E. Waiver(s) justification(s), clearance(s), certification(s) (Block 19) (specify number _____)

AFRICARE Ivermectin Distribution Program
A.I.D. Budget

	Year 1	Year 2	Year 3	Project Total
1. Personnel/Fringe	94,818	35,318	40,739	170,875
2. Travel Allowances	40,450	10,070	10,550	61,070
3. Training	800	700	700	2,200
4. Other Direct	24,750	8,050	6,750	39,550
5. Equipment	12,800	50	50	12,900
6. Supplies	3,490	3,490	3,490	10,470
7. Support Cost	57,435	21,750	23,750	102,935
8 TOTAL	234,543	79,428	86,029	400,000

AFRICARE IVERMECTIN DISTRIBUTION PROGRAM
DATE: _____
H. TRAYS: _____

FUNDS AVAILABLE
DATE: 9/11/91
H. TRAYS: 03

RECEIVED
19 SEP. 1991

AID 1350 1
(3 87)

**CONTROLLER OFFICE
USAID REDSO/WA**

AGENCY FOR
INTERNATIONAL DEVELOPMENT

PROJECT IMPLEMENTATION
ORDER/TECHNICAL
SERVICES

Page 1 of Pages 2

*PIO/T

2 PIO/T No _____
3 Original or Amendment No 1
4 Project/Activity No and Title
620-0007
Nigeria River Blindness

DISTRIBUTION

REDSO/WCA/OP
Original

REDSO/WCA
WAAC
PDO
CTR

5. Appropriation Symbol
72-1111021.8

6. Budget Plan Code
GDHA-91-21620-IG13

7. Obligation Status
 Administrative Reservation Implementing Document

8. Project Assistance Completion Date (Mo, Day, Yr.) _____

9. Authorized Agent
REDSO/ WCA

10. This PIO/T is in full conformance with PRO/AG No. _____ Date _____

11a. Type of Action and Governing AID Handbook
 AID Contract (HB 14) AID Grant or Cooperative Agreement (HB 13) PASA/RSSA (HB 12) Other

11b. Contract/Grant/Cooperative Agreement/PASA/RSSA Reference Number (if this is an Amendment) _____

12 Estimated Financing (A detailed budget in support of column (2) is attached as Attachment No. 2)

Maximum AID Financing Available	A. Dollars	(1) Previous Total	(2) Increase	(3) Decrease	(4) Total to Date
		\$400,000	\$20,000		
	B U.S.-Owned Local Currency				

13 Mission References

Lagos 012369
State 255160
State 257374
State 272973
Abidjan 015123

14A. Instructions to Authorized Agent
This PIO/T amends PIO/T No. 620-0007- issued September 6, 1991 by AAO/Lagos. The amendments are as follows:
-- Block 7: The check beside implementing document should be deleted and the check beside administrative reservation remains because the negotiated grant will be the obligating document.
(see continuation sheet)

RECEIVED
20 SEP 1991
Regional Office of Procurement
USAID REDSO/WCA

14B. Address of Voucher Paying Office
PFM/FM/ CMP/ LC

15 Clearances—Include typed name, office symbol, telephone number and date for all clearances.

A. The Project Officer certifies that the specifications in the statement of work or program description are technically adequate <i>Ethiavari</i> Rudolph Thomas, PRO, AAO/Lagos	Phone No. _____ Date <u>9/16/91</u>	B. The statement of work or program description lies within the purview of the initiating office and approved agency programs Rudolph Thomas, PRO, AAO/Lagos	Date _____
C. Steve Wisecarver, REDSQ/WCA/OP	Date _____	D. Funds for the services requested are available Alan Gordon, Controller, AAO/Lagos, State 255160	Date _____
E. Concurrence; F. Gilbert, REDSO/DIR	Date <u>9/30/91</u>	Signature <i>Ethiavari</i> Eugene Chiavaroli Title AJD Affairs Officer Date <u>9/16/91</u>	

16 For the Cooperating Country: The terms and conditions set forth herein are hereby agreed to
Signature Not Applicable Date _____
Title _____

*See HB 3, Sup. A, App C, Att B, for preparation instructions. Note: The completed form contains sensitive information whose unauthorized disclosure may subject an employee to disciplinary action.

Continuation Sheet
Project 620-007 Nigerria River Blindness

- Block 12: The grant total is \$420,000. An additional \$20,000 will be obligated in FY 92 for a Grant total of \$420,000.

- Block 14B: West Africa Accounting Center (WAAC); B.P. 1712, Abidjan, Cote d'Ivoire is deleted and is replaced with PFM/FM/CMP/LC.

- Block 18: (The program description is to be provided by S&T/H)

- Block 19E.: The geographic code (000) is checked.

- Block 20: diplomatic pouch, commissary, medical and logistical support are not provided.

- Block 12B.: The Granter will also liaise with Dr. A. Sorungbe, Director of Primary Health Care, Federal Ministry of Health.

- Attachment No. 2, A.I.D. Budget (To be revised by S

