

Approved on 5 March 2021

**The Board:**

- 1. Approves the funding recommended for each country disease component, and its constituent grants, as listed in Table 1 of GF/B44/ER11 ("Table 1");**
- 2. Acknowledges each country disease component's constituent grants will be implemented by the proposed Principal Recipients listed in Table 1, or any other Principal Recipient(s) deemed appropriate by the Secretariat in accordance with Global Fund policies;**
- 3. Affirms the funding approved under this decision (a) is subject to the availability of funding, and (b) shall be committed in annual tranches; and**
- 4. Delegates to the Secretariat authority to redistribute the overall upper-ceiling of funding available for each country disease component among its constituent grants, provided that the Technical Review Panel (the "TRP") validates any redistribution that constitutes a material change from the program and funding request initially reviewed and recommended by the TRP.**

**This decision does not have material budgetary implications for operating expenses.**

**Table 1: Secretariat's Recommendation on Funding from the 2020-2022 Allocation**

Please note that each country name is linked to the extranet site where supporting documents are available for review.

N	Applicant	Disease Component	Grant Name <sup>1</sup>	Grant End Date	Currency	Total Program Budget <sup>2</sup>	Catalytic Funds in Grant	Domestic Commitment <sup>3</sup>	Unfunded Quality Demand
1	Nepal	<a href="#">HIV</a>	NPL-H-SCF	31-07-24	US\$	27,763,388	1,100,000	16,050,947	15,907,406
2		<a href="#">Malaria</a>	NPL-M-SCF	31-07-24		4,075,805	-	14,161,839	1,822,000
3		<a href="#">TB</a>	NPL-T-SCF	31-07-24		20,487,789	-	44,292,735	14,622,448

<sup>1</sup> The Grant names are subject to change based on the ISO code.

<sup>2</sup> The Program budget for the Grant may be higher than the Program budget being recommended to the Board for approval where Covid-19 Response Mechanism funding has been integrated into the Grant.

<sup>3</sup> Domestic commitments pertain to the disease programs and exclude other specific commitments for RSSH, unless otherwise specified. Commitments for disease specific programs and RSSH are subject to local currency value fluctuation against US dollar and Euro currencies. Please note that the domestic commitments included in this report are recorded as of GAC date and may be updated during implementation for countries that have been granted policy flexibilities.