

04-282

USAID GRANT AGREEMENT NO. 497-0008.01

USAID GRANT AGREEMENT NO. 497-0393

AND

USAID/WASHINGTON PROJECT NO.498-0001

AMENDMENT NO. 2

STRATEGIC OBJECTIVE GRANT AGREEMENT

BETWEEN THE

REPUBLIC OF INDONESIA

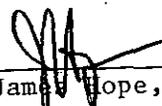
AND THE

UNITED STATES OF AMERICA

FOR

PROTECTING THE HEALTH OF THE MOST VULNERABLE WOMEN AND CHILDREN

Certified to be a true copy of
the original signed by


James Hope, Deputy Program Director
October 11, 2002

DATED: June 6, 2000

This AMENDMENT No. 2 is entered into between the REPUBLIC OF INDONESIA ("Grantee") and the UNITED STATES OF AMERICA, acting through the U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT ("USAID").

WHEREAS, the Grantee and USAID, entered into a Strategic Objective Agreement for Protecting the Health of the Most Vulnerable Women and Children dated August 13, 1999, which was amended on May 31, 2000, whereby USAID agreed, subject to the availability of funds, to grant to the Grantee not to exceed Twenty Eight Million Seven Hundred Thirty Two Thousand and Two Hundred Fifty Six U.S. Dollars (\$28,732,256); and

WHEREAS, the Grantee and USAID desire to further amend the Grant Agreement to provide an increment of USAID grant financing in the amount of Thirteen Million Four Hundred Fifty Thousand United States Dollars (\$13,450,000) and to make other related changes in the Grant Agreement;

NOW, THEREFORE, the Grantee and USAID hereby agree as follows:

1. Section 3.1 (a) The Grant: Current Increment. First sentence is revised by deleting the words "Twenty Eight Million Seven Hundred Thirty Two Thousand and Two Hundred Fifty Six United States Dollars (\$28,732,256)" to read "Forty Two Million One Hundred Eighty Two Thousand and Two Hundred Fifty Six United States Dollars (\$42,182,256)."

2. Table I Revised Budget Summary of the Grant Agreement is hereby deleted, substituting therefor the Table I Revised Budget Summary (5/00) attached as Attachment A to this Amendment No. 2

3. Except as amended herein, the Grant Agreement is unchanged and remains in full force and effect.

IN WITNESS WHEREOF, the Republic of Indonesia and the United States of America, each acting through its duly authorized representative, have caused this Amendment No. 2 to be signed in their names and delivered as of the day and year first above written.

REPUBLIC OF INDONESIA

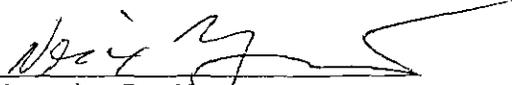


Dr. Achmad Sujudi MHA
Minister of Health



Khofifah Indar Parawansa
State Minister for Empowerment
of Women/Chairperson, National
Family Planning Coordinating Board

UNITED STATES OF AMERICA



Desaix B. Myers
Mission Director
USAID/Indonesia

Attachment A
To Amendment No.2

Table 1
Protecting the Health of the Most Vulnerable Women and Children
USAID GRANT AGREEMENT No. 497-0393 and USAID/WASHINGTON PROJECT No. 498-0001
Amendment No. 2
Revised Budget Summary (5/00)

Funding Category	USAID Grant Life of Program Funding (FY99 - FY02)		USAID Obligation First Increment		USAID Obligation Second Increment	USAID Obligation This Increment	Total Obligation to date (\$)	
	Amount in U.S. Dollars		USAID/ Indonesia (\$)	ANE Bureau/ AERA (\$)				
	TA*	Program**	Total	Indonesia (\$)	Indonesia (\$)	Indonesia (\$)	Indonesia (\$)	
a. Family Planning	5,600,000	8,400,000	14,000,000	1,700,000	0	5,505,000	0	7,205,000
b. Maternal and Neonatal Health	8,400,000	12,600,000	21,000,000	4,200,000	2,000,000	1,250,000	0	7,450,000
c. Child Health and Nutrition	6,400,000	9,600,000	16,000,000	2,500,000	4,500,000	2,332,256	12,950,000	22,282,256
d. HIV/AIDS	5,600,000	8,400,000	14,000,000	0	0	3,700,000	500,000	4,200,000
e. Crisis Monitoring and Surveillance	1,600,000	2,400,000	4,000,000	600,000	0	0	0	600,000
f. Program Management, Evaluation	1,000,000	0	1,000,000	0	0	445,000	0	445,000
Sub-Total	28,600,000	41,400,000	70,000,000	9,000,000	6,500,000	13,232,256	13,450,000	42,182,256

* Technical Assistance (both short-term and long-term) provided to the Government of Indonesia and to local non-governmental organizations by U.S. grant recipients and contractors to implement and manage the program.

** Includes direct program support such as training for health providers and officials, institutional strengthening, grants to international and local PVO/NGOs, surveillance, medical supplies and commodities.