Supplemental Letter

SOCIALIST REPUBLIC OF VIETNAM

July 17, 2014

International Development Association
1818 H Street, N.W.
Washington, D.C. 20433
United States of America

Re: Credit No. 5441-VN
(Health Professionals Education and Training for Health System
Reforms Project)
Section 5.01 of the General Conditions
Financial and Economic Data

Dear Sir/Madame:

In connection with the Financing Agreement (Financing Agreement) of this date between
the Socialist Republic of Vietnam (Member Country) and International Development Association
(Association) providing financing (Financing) for the above-captioned Project, and the General
Conditions (General Conditions) made applicable to the Financing Agreement, I am writing on
behalf of the Member Country to set forth the following:

1. We understand and agree that, for purposes of Section 5.01 of the General Conditions,
the Member Country is required by the Association, to report “long-term external debt” (as
defined in the World Bank’s Debtor Reporting System Manual, dated January 2000 (DRSM)), in
accordance with the DRSM, and in particular, to notify the Association of new “loan
commitments” (as defined in the DRSM) not later than 30 days after the end of the quarter during
which the debt is incurred, and to notify the Association of “transactions under loans” (as defined
in the DRSM) once a year, not later than March 31 of the year following the year covered by the
report.

2. We represent that, except as stated in the Annex hereto, no defaults exist in respect of any
external debt (as defined in the DRSM). It is our understanding that, in making the Financing, the
Association may rely on the representations set forth or referred to in this letter.
3. Please confirm your agreement to the foregoing by having a duly authorized representative of the Association sign in the space provided below.

Very truly yours,

SOCIALIST REPUBLIC OF VIETNAM

[Signature]

By __________________________
Authorized Representative

AGREED:

INTERNATIONAL DEVELOPMENT ASSOCIATION

[Signature]

By __________________________
Authorized Representative