



Likasi displacement site, Kalemie, Tanganyika province, © IOM 2020, Daco Tambikila

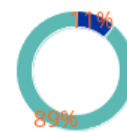
IOM VISION

UPDATED: 29 JAN 2021

In 2021, IOM, in collaboration with its partners and other crisis response actors, seeks to provide urgently needed multisectoral humanitarian assistance, stabilization and recovery support to conflict-affected populations in the Democratic Republic of the Congo (DRC). IOM will also continue to support the government in responding to the COVID-19 pandemic and post-Ebola stabilization efforts as well as strengthening preparedness for future public health hazards. Considering the many requests for accurate displacement data in the DRC, IOM also aims at expanding the scope of its Displacement Tracking Matrix (DTM) interventions to cover the entire country, including monitoring of population mobility to inform outbreak preparedness and response.

\$136,000,000

Funding Required



■ F. Confirmed: 15.23 M
■ F. Gap: 120.77 M

2,700,000

People Targeted

250

Entities Targeted

IOM PROPOSED RESPONSE

CONTACT INFORMATION

OBJECTIVE

FUNDING REQUIRED

FUNDING CONFIRMED

OBJECTIVE	FUNDING REQUIRED	FUNDING CONFIRMED
Save lives and respond to needs through humanitarian assistance and protection	52,000,000	7,907,483
Address the drivers and longer term impacts of crises and displacement through investments in recovery and crisis prevention	64,000,000	4,207,902
Contribute to an Evidence Based and Efficient Crisis Response System	13,000,000	2,487,585
Strengthen preparedness and reduce disaster risk	7,000,000	627,671

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PRIMARY TARGET GROUPS

1. Internally displaced person
2. Local population / community
3. Former combatant / fighter
4. Internal migrant
5. International migrant

BREAKDOWN OF FUNDING REQUIREMENTS (USD) 2021

OBJECTIVES AND ACTIVITY AREAS	2021
Save lives and respond to needs through humanitarian assistance and protection	
Camp Coordination and Camp Management	12,000,000
Shelter, Settlements and Non-Food Items	20,000,000
Provision of Water, Sanitation and Hygiene in Emergencies	15,000,000
Direct Health Support	2,000,000
Mental Health and Psychosocial Support in Humanitarian Response	3,000,000
Address the drivers and longer term impacts of crises and displacement through investments in recovery and crisis prevention	
Peacebuilding and peace preservation	20,000,000
Durable Solutions	5,000,000
Community stabilization	30,000,000
Health System Strengthening	8,000,000
Mental Health and Psychosocial Support: Dialogue and Social Cohesion towards Recovery and Crisis Prevention	1,000,000
Strengthen preparedness and reduce disaster risk	
Health Components of Preparedness and Risk Reduction	3,000,000
Points of Entry	3,000,000
System Strengthening for Mental Health and Psychosocial Support	1,000,000
Contribute to an Evidence Based and Efficient Crisis Response System	
Displacement Tracking	10,000,000
First Line of Defence	3,000,000
TOTAL FUNDING REQUIRED	136,000,000

2021 - Democratic Republic of the Congo Crisis Response Plan 2021

CONTEXT ANALYSIS

The Democratic Republic of the Congo continues to experience armed and intercommunal conflicts, disasters related to natural hazards and disease epidemics that have created one of the world's most complex and long-standing crises. Since the beginning of 2020, the humanitarian situation in the country has deteriorated with an upsurge in population movements and protection incidents caused by intensified armed conflicts, particularly in Ituri, North Kivu, Tanganyika Province, and South Kivu provinces. This situation will continue to influence the humanitarian situation in the DRC in 2021. The humanitarian community estimates 19.6 million people will be in need of humanitarian assistance during the first half of the year, with 5.2 million people internally displaced, making the DRC the country hosting the largest population of IDPs in Africa (HNO, 2021).

Since March 2020, the dire humanitarian conditions in the DRC have been further compounded by the outbreak of the Ebola Virus Disease (EVD). The 11th EVD outbreak in Equateur province was declared over on 18 November 2020 with 119 confirmed cases and 44 confirmed deaths; however, the country remains on high alert and continues post-Ebola stabilization efforts in the Equateur and Eastern DRC provinces, including enhancing surveillance and strengthening epidemic preparedness and response capacity. Since March 2020, the COVID-19 pandemic has placed additional pressure on already very limited infrastructure and basic social services in the DRC, exacerbating the vulnerabilities and worsening the already precarious living conditions of the population. Since October 2020, the country is experiencing the beginning of what is predicted as a second wave of the COVID-19 pandemic, with a steep increase in the incidence of cases and hospital admissions, especially in Kinshasa.

Recurrent measles, cholera and malaria epidemics result in significant morbidity and mortality, especially among the most fragile populations with limited access to health services or forced to move due to insecurity. The situation requires a multi-faceted response that considers various challenges faced by affected populations.

Despite the signing of several peace agreements, the significant investment of international resources, and the peaceful transfer of power to President Tshisekedi in 2019, which initially brought a strategic opportunity for stabilization efforts due to a new political commitment and spontaneous surrenders of several armed groups, large parts of the DRC continue to suffer from a lack of social cohesion, humanitarian crises, and the absence of public services. The lack of effective governance of mineral resources also continues to remain a significant challenge for conflict resolution, economic growth and respect of human rights.

COORDINATION

IOM coordinates the implementation of its country strategy through the Ministry of Interior, the Ministry of Planning, the Ministry of Foreign Affairs and Congolese Abroad, the Ministry of Humanitarian Affairs, the Ministry of Employment, Labour and Social Welfare, Ministry of Health, the Directorate General for Migration and the Director General for National Border Management. At the community-level, IOM collaborates with civil society and communities, particularly when it comes to local dialogue and inclusive and participatory governance mechanisms. IOM DRC is an active member of the Humanitarian Country Team, United Nations Country Team, Programme Management Team, and similarly, an active member of various Clusters namely WASH, Shelter and Non-Food Items (S-NFIs), Protection, and Health Clusters. Together with UNHCR, IOM is co-leading the Camp Coordination and Camp Management (CCCM) Working Group in three provinces (North Kivu, Tanganyika, and Ituri). Through these fora, IOM works with the broader humanitarian community to coordinate life-saving assistance harmonize approaches and minimize risks of duplication. IOM's WASH, Shelter, CCCM and Protection teams collaborate closely with the aim of providing an integrated response, taking into consideration protection risks. As co-lead of the CCCM Working Group in the three above-mentioned provinces, IOM works closely with government counterparts in the respective provinces, namely the Commission Nationale pour les Réfugiés (CNR) in North Kivu, Division des Affaires Humanitaires (DIVAH) in Tanganyika, and Protection Civile in Ituri to support their function in camp administration. In addition, IOM is a leading partner in health emergency response in collaboration with the Ministry of Health in disease outbreaks, including EVD. IOM is currently the government's co-lead for the Point of Entry Sub Commission under the Surveillance Commission for the 11th EVD outbreak transition and recovery efforts.

IOM CAPACITY

IOM in DRC has a strong geographical presence throughout the country, with strategically located offices, including the

main office in Kinshasa and various sub-and satellite offices in North-Kivu, South-Kivu, Ituri, Tanganyika, Haut-Katanga, Kasai oriental, Kasai, and Equateur provinces. IOM has been implementing humanitarian response and stabilization programs in DRC for more than 10 years and has expanded its activities in response to the growing humanitarian crisis and continuing instability in DRC. IOM's expertise in border health surveillance and management was paramount in supporting the Ministry of Health in recent EVD and COVID-19 epidemic responses, enhancing surveillance capacity at points of entry and setting up points of control along main mobility routes, to contain disease transmission. Further, IOM in DRC has been running a long-term programme providing tailored health assessments to migrants, counting on a multidisciplinary team of health specialists and a laboratory investigation programme that was mobilised to support the COVID-19 outbreak response. IOM is currently implementing emergency operations covering CCCM, Information Management/DTM, Shelter, WASH, and Protection in displacement sites, host communities, and return areas in North-Kivu, Tanganyika and Ituri provinces. Additionally, in North Kivu, Ituri, Tanganyika, Kasai Oriental and Haut Katanga provinces, IOM is implementing health, community stabilization and peacebuilding projects. IOM in DRC has set up dedicated technical teams encompassing various sectors including health, Shelter, WASH, CCCM, and DTM based in North-Kivu, Tanganyika and Ituri provinces. These technical teams are ready to be deployed to other provinces facing new crises. This system has enabled IOM to maintain an active presence in intervention areas as well as in the cascade effect of capacity building and monitoring activities. Further, IOM is also supporting early recovery efforts by contributing to sustainably resolve long-term displacement, providing equitable access to services, and promoting inclusive governance and social cohesion.

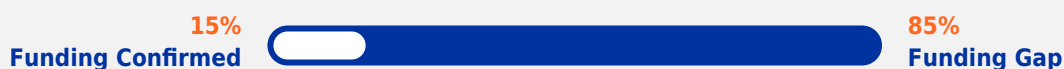
SAVE LIVES AND RESPOND TO NEEDS THROUGH HUMANITARIAN ASSISTANCE AND PROTECTION

Funding Required
\$52,000,000

People Targeted
200,000

People Targeted Description

Vulnerable affected populations including displaced populations, and host communities with acute sectoral needs including WASH, shelter, NFIs, health, CCCM and protection.



CAMP COORDINATION AND CAMP MANAGEMENT

In 2021, IOM aims to continue and strengthen its interventions in CCCM to ensure that basic minimum living standards for displaced populations are met within displacement sites and host communities, that the provision of humanitarian assistance is coordinated through the CCCM Working Group, that sectoral gaps (WASH, shelter, NFIs, protection, education and health) and protection risks are identified in consultation with communities, especially women and girls, and that mitigation measures are undertaken. IOM will also ensure that information on the numbers and profiles of IDPs are available, updated and shared with the humanitarian community on a regular basis. These initiatives will include:

- Monitoring arrivals and departures of IDPs;
- Providing and managing information on camp population and services through site assessments;
- Site planning/layout activities, site maintenance and improvements;
- Strengthening capacities of IDP committees, site managers and government partners on site administration and governance of structures and ensuring meaningful participation and representation of women;
- Supporting community-based protection mechanisms, closing sites when relevant;
- Providing appropriate and coordinated humanitarian assistance within the sites and in host communities by engaging and empowering IDPs through the provision of necessary tools for camp coordination and management;
- Advocating and coordinating efforts for voluntary return, relocation and reintegration for displaced populations;
- Providing training to camp management staff and partners to respond safely and ethically to protection incidents and ensure functional referral mechanisms.

Funding Required
\$12,000,000

Funding Confirmed
\$2,805,461





SHELTER, SETTLEMENTS AND NON-FOOD ITEMS

Context-specific shelter operations in displacement sites, host communities and return areas are essential to support a minimum dignified standard of living, lower the risks of health-related issues, and reduce protection risks, including GBV. In 2021, IOM will continue to conduct regular need assessments to assess shelter and household needs in the coordinated displacement sites and in new spontaneous sites, as well as in host communities. The most vulnerable IDPs in these sites and host communities will be targeted and provided with emergency shelter and NFI kits through various modalities, including in-kind assistance and/or conditional cash. In North Kivu, Ituri and Tanganyika, IOM will:

Funding Required
\$20,000,000



- Continue an inclusive approach focused on engaging beneficiaries in order to provide improved, context-specific shelter solutions (e.g. emergency shelter, transitional shelter, conditional cash for shelter construction) based on people's needs;
- Improve self-recovery and resilience mechanisms of conflict-affected IDPs by working with a group of community members trained in emergency shelter solutions to actively involve affected populations in the response;
- Provide IDPs with shelter materials and technical guidance, in line with sphere and cluster standards, on how to construct, repair, and maintain shelters;
- Provide materials and equipment to IDP committees to support the most vulnerable households (including persons with special needs, people living with disabilities, women heads of households, pregnant and breastfeeding women, people at risk and survivors of gender-based violence, etc.) with shelter construction;
- Conduct needs assessment and satisfaction surveys to ensure that protection is mainstreamed during shelter construction.



PROVISION OF WATER, SANITATION AND HYGIENE IN EMERGENCIES

IOM's WASH interventions aim at improving access to sufficient and safe WASH services for conflict-affected populations, as well as improving hygiene practices in displacement sites, host communities, and return areas in North Kivu, Tanganyika, and Ituri. This will include:

Funding Required
\$15,000,000



- Construction and decommissioning of latrines and showers disaggregated by sex;
- Construction and/or rehabilitation of water system networks;
- Maintaining WASH facilities to ensure their viability through IOM's support to the community-based WASH committees in displacement sites;
- Continuing to integrate protection and GBV mainstreaming in its WASH interventions in displacement sites, host communities and in areas of return to mitigate risks and prevent protection concerns;
- Conducting hygiene promotion activities in displacement sites across North Kivu, Ituri, and Tanganyika provinces based on a thorough understanding of hygiene knowledge, attitudes and practices of IDPs and host communities to prevent waterborne diseases, and improving the health of target communities. All hygiene promotion activities will be carried out following national guidelines on COVID-19 preventive measures, such as physical distancing, and limitation of participants;
- Continuing to strengthen the provision of critical WASH facilities and services in targeted displacement sites, especially handwashing kits at the household level, to improve access to basic hygiene services, necessary to protect against communicable diseases including COVID-19;
- Supporting WASH in health-related activities, especially in outbreak zones and at the health facilities.



DIRECT HEALTH SUPPORT

IOM will provide life-saving primary health services, referral, and health facility support in formal and informal displacement sites, return, relocation, and integration areas. These initiatives will include:

- Implementing essential health services and case management and referrals to specialised care. The health care package will depend on the context and already existing services and will include adult and paediatric care, nutritional services, management of communicable and non-communicable diseases, sexual and reproductive health services, immunisation, GBV, health promotion, risk communication and community engagement activities;
- Supporting existing Ministry of Health facilities in crisis-affected zones and areas of return to ensure comprehensive and continuum of care for affected populations through the provision of equipment and consumables, upgrade of infrastructure, capacity-building trainings for frontline workers and need assessments;
- Improving capacities of health teams from IOM, Ministry of Health and partners operating in camps and out-of-camps, by enhancing knowledge and technical expertise on different aspects of emergency health in displacement settings.

Funding Required
\$2,000,000

Funding Confirmed
\$942,670

47% 53%



MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT IN HUMANITARIAN RESPONSE

IOM will provide MHPSS services with a focus on services which ensure a strengthened protection environment in the formal and informal displacement sites and in the host communities/communities of return. All activities will be in line with the IOM Manual on Community-Based MHPSS in Emergencies and Displacement. These initiatives will include:

- Facilitating access to psychosocial services (i.e. mobile MHPSS team, or counselling, PSS hubs, referrals, mediation, psychodrama, etc.) and other measures to ensure social considerations and the safety of beneficiaries;
- Strengthening family and community support for people who can maintain their mental health and psychosocial well-being if they receive help in accessing this level of assistance;
- Providing focused psychological services (i.e. individual and group counselling) to people with pre-existing and/or emerging forms of severe stress, behavioural and relational problems, and mental disorder conditions, including in the context of the COVID-19 pandemic, and to survivors of violence;
- Strengthening the capacity of IOM's personnel, civil society and government partners in the field of MHPSS including the provision of a survivor-centred approach in the case of violence and sexual violence.

Funding Required
\$3,000,000



Kisalaba displacement site, Tanganyika, © IOM 2020, Daco Tambikila

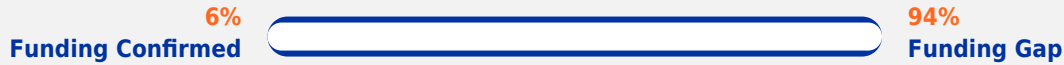
ADDRESS THE DRIVERS AND LONGER TERM IMPACTS OF CRISES AND DISPLACEMENT THROUGH INVESTMENTS IN RECOVERY AND CRISIS PREVENTION

Funding Required
\$64,000,000

People Targeted
1,000,000

People Targeted Description

Populations displaced by conflict and/or disasters related to natural hazards, including IDPs, returnees, and communities. In addition, IOM supports the government's work with former combatants to address their needs and support their reintegration and rehabilitation. In recognition of the importance of effective governance of mineral resources, in 2021, IOM will work with people living in mining settlements to assess and address health needs and promote stability. In doing so, IOM supports related government authorities and institutions.



PEACEBUILDING AND PEACE PRESERVATION

Diverse and interrelated drivers of conflict have perpetuated insecurity and led to cyclical non-state armed group recruitment. In close coordination with community stabilization initiatives, IOM will continue to implement peacebuilding interventions with a focus on identifying and addressing drivers of conflict by supporting both community-based and government-led peace initiatives. These initiatives will include:

- Democratic dialogue initiatives;
- Strengthening and/or establishing community-based conflict early warning and management mechanisms;
- Socio-economic reintegration of former combatants;
- Reconciliation activities in conflict-affected communities;
- Capacity building and institution building, intended to reduce or mitigate the drivers of conflict.

Funding Required
\$20,000,000



DURABLE SOLUTIONS

IOM will continue to provide durable solutions to IDPs and conflict-affected communities through the provision of immediate and longer-term support, in-line with relevant frameworks on displacement, durable solutions and the humanitarian-development-peace nexus approach in the DRC. IOM will implement interventions in line with its Progressive Resolution of Displacement Situations (PRDS) framework for a broader and more inclusive approach. Interventions will be built upon the PRDS pillars: (1) protection, safety and security; (2) an adequate standard of living (access to adequate food, water, housing, health services and education); (3) access to sustainable livelihoods; and (4) inclusive governance. These initiatives will include:

- Supporting voluntary return, relocation and reintegration for displaced populations through the provision of transportation assistance, transitional shelter, and multisectoral cash assistance. IOM will ensure that beneficiaries are transported in a safe, voluntary and dignified way.
- Advocating at various fora (e.g. UNCT, clusters, etc.), to donors, and local authorities for coordinated efforts and programming across the humanitarian-development-peace nexus;
- Providing (re)integration support activities such as public information campaigns and activities, strengthening community social cohesion (in coordination with the peacebuilding component);
- Strengthening early economic recovery and value chains in order to reinforce livelihood opportunities (in coordination with the community stabilization component);
- Establishing an exchange platform for inclusive participation in the decision-making process;
- Raising awareness on international protection and assistance principles, including a module on camp closure and durable solutions.

Funding Required
\$5,000,000





COMMUNITY STABILIZATION

IOM's programme will continue to employ a coordinated and integrated approach including democratic dialogue, strengthening state authority, return, reintegration and economic recovery, as well as responsible minerals trade. Strategic components of the programme include:

- Promoting social cohesion and enabling communities to manage local conflicts in coordination with peacebuilding initiatives;
- Increasing access to livelihoods and promoting economic recovery through interventions including a cash-for-work, vocational training, reinforcing value chains and access to credit;
- Strengthening government capacities to perform core functions and deliver basic services;
- Increasing confidence and mutual trust between the population and public institutions through measures to promote inclusive and participatory governance processes, access to justice and rule of law;
- Promoting the rule of law through police professionalization and inclusive and participatory local security management;
- Strengthening government capacities to facilitate responsible mineral trade.

Funding Required
\$30,000,000

Funding Confirmed
\$3,178,261

10% 90%



HEALTH SYSTEM STRENGTHENING

Primary health care coverage is insufficient in areas of return, thus impeding safe and sustainable reintegration and contributing to high burdens of morbidity and mortality among returnees and local communities. These initiatives will include:

- Rehabilitation of primary healthcare centres and supporting the provision of comprehensive care;
- Capacity-building of health professionals, including on mental health care and mobile population health needs;
- Development of an evidence-based strategy to address the health needs in mining contexts.

In addition to its interventions in areas of return, IOM will address the health needs of people living around the mining sites. Health systems strengthening initiatives in areas surrounding mining settlements will include:

- Rehabilitation of primary health care centres and supporting the provision of comprehensive care;
- Capacity-building of health professionals, including on mental health, communicable diseases, occupational health risks and GBV.

Funding Required
\$8,000,000

Funding Confirmed
\$1,029,641

12% 88%



MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT: DIALOGUE AND SOCIAL COHESION TOWARDS RECOVERY AND CRISIS PREVENTION

IOM will develop a mental health and psycho-social support strategy to complement the transition and recovery programme in post-Crisis communities. These initiatives will include:

- Strengthening and implementation of community-based support aiming at mending social fabrics and promoting social cohesion;
- Capacity-building of health professionals, local police and security actors on mental health issues;
- Provision of MHPSS for former combatants.

Funding Required
\$1,000,000



STRENGTHEN PREPAREDNESS AND REDUCE DISASTER RISK

Funding Required
\$7,000,000

People Targeted
1,000,000

People Targeted Description

Beneficiaries will include: international border authorities, including national, provincial and local authorities, to strengthen international border management and global health security; populations affected/vulnerable to disease outbreaks and epidemics along major mobility pathways; and mobile populations crossing points of entry at international borders and points of health control along strategic mobility routes, as well as the communities living in the surrounding areas.



HEALTH COMPONENTS OF PREPAREDNESS AND RISK REDUCTION

IOM will support the Ministry of Health to develop emergency preparedness and response plans, including for disease outbreaks, aiming to foster a migration-sensitive approach to preparedness and risk reduction. These initiatives will include:

- Mapping of health risks and emergencies in the areas of intervention;
- Population Mobility Mapping exercises to better understand mobility trends and inform national preparedness and response planning for outbreaks and other public health threats;
- Coordination with national and international actors;
- Supporting COVID-19 preparedness and response with a focus on preventing and monitoring risks of epidemic spread across borders and along major mobility routes in the country;
- Supporting laboratory investigation capacity as already done in 2020;
- Supporting COVID-19 vaccination of mobile populations at high-risk based on the yet-to-be finalised DRC COVID-19 vaccination strategy;
- Enhancing Risk Communication and Community Engagement (RCCE) across all IOM projects and target populations.

Funding Required
\$3,000,000

Funding Confirmed
\$627,671



POINTS OF ENTRY

IOM will continue to build its expertise in global health security and health border management in DRC, both in emergency and stable contexts, providing support to the Ministry of Health and promoting a multi-sectoral approach to border management in collaboration with other IOM departments. Initiatives will include:

- Strengthening Ministry of Health technical and operational capacity on disease surveillance and management, and develop International Health Regulations (IHR) 2005 competences at the national, provincial and local level;
- Fostering a multisectoral approach on the management of POE;
- Mapping of existing POE and main mobility routes;
- Developing and piloting a Community Event-Based Surveillance (CEBS) and RCCE strategy for mobile populations crossing international and provincial borders and the communities in which they live/work and transit, including informal cross border traders;
- Developing and piloting a zonal approach to mobile population health, integrating POE disease surveillance within the existing health zone structure.

Funding Required
\$3,000,000



SYSTEM STRENGTHENING FOR MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

MHPSS services are a key need in DRC, where protracted crises and violence have affected millions of people, yet the coverage of needs is largely insufficient. IOM will promote MHPSS know-how to a range of actors. These initiatives will include:

- Delivery of trainings directed toward several targeted audiences including health care workers, front-line workers at targeted points of entry, and security forces (e.g. police, Direction Générale de Migration - DGM).

Funding Required
\$1,000,000



CONTRIBUTE TO AN EVIDENCE BASED AND EFFICIENT CRISIS RESPONSE SYSTEM

Funding Required
\$13,000,000

People Targeted
500,000

People Targeted Description

First Line of Defence (FLOD) beneficiaries will include UN personnel and eligible dependents, as well as frontline workers and mobile populations providing COVID-19 related first line of defence services. DTM products will benefit the humanitarian community, including UN agencies, national and international NGOs, development actors, etc.



DISPLACEMENT TRACKING

DTM tracks and monitors displacement and movements of populations in IDP sites and host communities. IOM aims to continue implementing different components of its DTM while expanding the ongoing DTM activities to reach nationwide coverage. The DTM interventions will focus on mobility tracking, registration of IDPs, surveys and assessments including intention surveys for durable solutions and vulnerability assessments, flow monitoring, and emergency tracking. Initiatives will include:

- Providing the crisis response community with a comprehensive picture on the number, profile and needs of conflict-affected populations;
- Continuing to produce and share maps and profiles of IDP sites;
- Expanding the use of IOM's Emergency Tracking Tool (ETT) to rapidly collect information on demographic data of the displaced population, areas of origin, locations where they take refuge and humanitarian assistance required following the alert of new displacement;
- Continuing engaging DTM to support preparedness and response to the Ebola Virus Disease (EVD), COVID-19, cholera and other emerging epidemics. This includes the assessment at village level on the availability of health facilities, COVID-19 awareness and infection within the surveyed communities;
- Continuing implementing flow monitoring activities to monitor the movement of populations crossing international borders and travelling across major mobility routes where POC might be established in the case of epidemic.

Funding Required
\$10,000,000

Funding Confirmed
\$2,487,585



FIRST LINE OF DEFENCE

IOM DRC will continue providing COVID-19 related services according to the country Memorandum of Understanding (MoU) with the UNCT. These initiatives will include:

- Expanding the laboratory investigation capacity to increase the geographical coverage beyond Kinshasa province and ensuring the services are available to the great majority of eligible UN personnel and dependants deployed in the country.

Funding Required
\$3,000,000

