ClearVision Global Health, Inc.
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LONG-TERM COLLABORATION PROTOCOL

Cataract Surgery Funding, On-Site Partnership, and Longitudinal Outcomes Research

ORGANIZATION	HOSPITAL PARTNER
ClearVision Global Health, Inc. Eren Coban, Founder & Executive Director 17422 Straloch Lane Richmond, Texas 77407, USA eren@clearvisionglobalhealth.org clearvisionglobalhealth.org	**Golden Life American Hospital** Benjamin Baysal, Chief Executive Officer Badalabougou, Rue 50, Porte 734 Bamako, Mali Tel: +223 20 22 11 11 glahospital.com

Effective Date: _____

This Protocol constitutes the entire agreement between the Parties upon signature. Any amendments must be in writing and signed by both Parties.

PREAMBLE

This Long-Term Collaboration Protocol ("the Protocol") is entered into by and between ClearVision Global Health, Inc. ("the Organization"), a nonprofit corporation incorporated in the State of Texas, United States, represented by its Founder and Executive Director Eren Coban, and Golden Life American Hospital ("the Hospital"), a healthcare facility located in Bamako, Mali, represented by its Chief Executive Officer Benjamin Baysal.

The Parties enter this Protocol on the foundation of a documented prior collaboration. Beginning in September 2025, Eren Coban engaged Golden Life American Hospital in a series of eight documented communications and three virtual meetings, culminating in a formal Collaboration Protocol signed January 15–17, 2026. Under that agreement, a four-week surgical engagement was conducted from March 13 to April 11, 2026, during which approximately 85 patients received phacoemulsification cataract surgery. Eren Coban participated on-site in supervised administrative and observational roles, including patient intake, outcome monitoring, and data collection.

This new Protocol supersedes that agreement entirely and establishes a permanent institutional partnership of indefinite duration. It reflects the Organization's evolution from an individual fundraising effort into a registered nonprofit committed to expanding access to surgical care for underserved populations through sustainable, transparent, and rigorously documented programs. The Hospital is recognized as the Organization's primary surgical partner in Mali, and this relationship is intended to deepen and expand over many years.

1. PURPOSE AND SCOPE

This Protocol governs an ongoing partnership with three integrated and mutually reinforcing components:

Surgery Funding:

The Organization shall raise funds and transfer them to the Hospital on a quarterly basis to support phacoemulsification cataract surgeries for underserved patients in Mali. The Hospital shall organize surgical operations according to its own clinical scheduling — whether on an annual, semi-annual, or quarterly basis — using transferred funds at its operational discretion within the terms of this Protocol.

Annual On-Site Engagement:

Eren Coban, or a designated representative of the Organization, shall conduct a formal annual visit to the Hospital for the purposes of participating in patient selection, observing surgical procedures, conducting data collection activities, and attending program review meetings with Hospital staff.

Longitudinal Research Program:

The Parties shall collaborate on a multi-year research study examining the full scope of the Organization's impact — spanning donor behavior and motivation, patient selection equity, surgical outcomes, quality-of-life impact on patients and communities, and program sustainability. Data will be collected systematically across program years and used toward peer-reviewed publication.

All activities under this Protocol shall prioritize patient welfare, community trust, ethical rigor, and the long-term sustainability of the Hospital's humanitarian surgical capacity.

2. DURATION AND RENEWAL

This Protocol shall become effective on the date of final signature by both Parties. It shall remain in force for an initial term of one (1) year and shall renew automatically for successive one-year terms unless either Party provides written notice of non-renewal at least sixty (60) days prior to the end of the then-current term.

At least forty-five (45) days before each annual renewal date, the Parties shall convene a review meeting — in person or by video — to assess the prior year's surgical outcomes, financial reporting, research progress, and any proposed changes to the Protocol's terms. Proposed amendments require written agreement signed by both Parties and take effect as a numbered addendum.

Either Party may terminate this Protocol for cause upon thirty (30) days written notice if the other Party materially breaches any provision herein and fails to cure that breach within the notice period. Termination does not relieve either Party of obligations that arose prior to the termination date.

3. SURGERY FUNDING

3.1 Quarterly Fund Transfers

The Organization shall transfer funds to the Hospital based on funds actually raised during each program year. The Organization's fundraising goal is $20,000 USD per year, intended to fund approximately 200 cataract surgeries at an approximate cost of $100 per procedure. This goal is a best-effort target only and does not constitute a guaranteed or minimum financial commitment. The Organization shall not be held liable for any shortfall in fundraising, and no penalty, obligation, or legal liability shall arise from transferring less than the stated goal in any given year.

Transfer amounts and timing shall be communicated to the Hospital in writing at the start of each program year and updated as fundraising results develop. The

Organization may transfer additional funds above its stated goal if fundraising allows, subject to mutual written agreement on their designated use prior to transfer.

3.2 Surgical Scheduling

The Hospital retains full discretion over the scheduling, structure, and clinical organization of surgical operations. The Hospital may conduct surgeries on an annual, semi-annual, or quarterly schedule as best suits its clinical capacity and patient population. The Organization shall not dictate surgical timing but shall coordinate fund transfers to ensure adequate resources are available prior to each planned surgical period.

3.3 Patient Selection

The Hospital shall implement and document an equitable patient selection process prioritizing individuals who lack access to cataract surgery due to financial or geographic barriers. Selection criteria shall include visual acuity thresholds, medical eligibility for phacoemulsification, and demonstrated financial need. The patient selection framework shall be shared with the Organization annually and included in the research data collection program described in Section 5.

During annual on-site visits, the Organization's representative may participate in patient selection activities under direct Hospital supervision. All clinical decisions remain exclusively with the Hospital's medical team.

3.4 Financial Accountability and Reporting

The Hospital shall apply all transferred funds exclusively to approved surgical purposes. In support of the Organization's transparency obligations to its donors, the Hospital shall provide:

(a) A quarterly financial update within fifteen (15) days of the close of each quarter, including a line-item accounting of all expenditures from transferred funds during that period.

(b) An annual expenditure summary within thirty (30) days of the close of each program year, covering total funds received, total funds expended by category, surgical volume achieved, and any unexpended balance.

(c) Documentation of any material deviation from the agreed annual budget, communicated to the Organization in writing within ten (10) days of such deviation.

Any unexpended funds at year-end shall be carried forward into the next program year by default, or returned to the Organization upon written request.

4. ANNUAL ON-SITE VISITS

4.1 Commitment and Planning

The Organization commits to one formal on-site visit per program year. The timing and duration of each visit shall be agreed upon in writing by both Parties at least sixty (60) days in advance, coordinated to coincide with a planned surgical period when possible. Visits are expected to last approximately two to four weeks.

4.2 Purpose and Activities

Each annual visit shall serve the following formal purposes:

(a) Patient Selection Participation: The Organization's representative shall participate in the patient intake and selection process under direct Hospital supervision.

(b) Surgical Observation: The representative shall observe phacoemulsification procedures and associated pre- and post-operative care.

(c) Data Collection: The representative shall conduct or support structured data collection activities as defined in the annual research plan.

(d) Program Review Meetings: The representative shall meet with Hospital leadership and clinical staff to review program performance, financial status, research progress, and plans for the coming year.

The Organization's representative shall not perform any clinical procedures, administer medications, or make clinical decisions of any kind.

4.3 Hospital Responsibilities During Visits

The Hospital shall provide the Organization's representative with orientation, daily supervision, facilitation of scheduled data collection activities, access to program records, and a formal Certificate of Participation at the conclusion of each visit.

5. LONGITUDINAL RESEARCH PROGRAM

5.1 Research Vision

The Parties shall collaborate on a multi-year longitudinal research study examining the full impact of this initiative. The target venue for primary publication is a respected peer-reviewed journal in global health or ophthalmology, such as PLOS ONE, BMC Ophthalmology, The Lancet Global Health, or equivalent. Eren Coban shall serve as first author on publications arising from this research.

5.2 Research Domains

The research program shall collect and analyze data across the following domains:

(a) Donor Motivation and Behavior

(b) Patient Selection and Equity

(c) Surgical Outcomes

(d) Patient Quality of Life and Functional Impact

(e) Community Impact

(f) Program Sustainability

5.3 Data Collection

The Organization shall develop all data collection instruments subject to Hospital review and approval prior to use. An annual research plan shall be agreed upon by the Parties at the start of each program year.

5.4 Hospital Data-Sharing Obligations

The Hospital shall provide de-identified patient outcome data for all patients receiving surgery under this Protocol, facilitate patient-reported outcome surveys, share documented patient selection criteria and cohort demographics, and provide all data in a structured format within thirty (30) days of the close of each program year.

5.5 Ethics and IRB Compliance

All research activities involving human subjects shall require prior approval from the Hospital's Institutional Review Board (IRB) or equivalent ethics committee. Informed consent processes, data anonymization standards, and patient privacy protections shall comply with Mali's national health regulations and the Declaration of Helsinki.

5.6 Authorship and Publication

Authorship shall follow ICMJE guidelines. Hospital medical staff whose contributions meet authorship criteria shall be offered co-authorship. Final manuscript drafts shall be reviewed by both Parties before submission. Neither Party shall submit findings for publication without the other's written approval, which shall not be unreasonably withheld.

6. TRANSPARENCY AND PUBLIC REPORTING

The Organization is committed to public transparency regarding its programs and the use of donor funds. The Organization shall publish relevant information about its activities and finances on its public website at clearvisionglobalhealth.org on a periodic basis, in a form and at a frequency determined at the Organization's discretion. No patient names or personally identifying information shall ever be published.

7. GOVERNANCE AND COMMUNICATION

The primary point of contact for the Organization shall be Eren Coban (eren@clearvisionglobalhealth.org). The Hospital shall designate a primary point of contact in writing at the time of signing.

The Parties shall hold a brief virtual check-in at least quarterly, aligned with the quarterly fund transfer cycle. All formal communications shall be made in writing via email with confirmation of receipt, or by registered post to the addresses on record.

8. ETHICS AND COMPLIANCE

All activities under this Protocol shall comply with the Hospital's institutional ethics guidelines, Mali's national health regulations, patient confidentiality laws, and relevant international standards. The Organization's representatives shall at all times conduct themselves in a manner consistent with the ethical standards expected of global health professionals and with the dignity and privacy of every patient they encounter.

9. NON-EMPLOYMENT AND INDEPENDENT STATUS

This Protocol establishes no employment relationship, consulting relationship, entitlement to compensation, benefits, or professional licensure of any kind between the Parties or between either Party and the other's personnel. The Organization is an independent nonprofit entity and shall not represent itself as an agent or legal representative of the Hospital for any purpose.

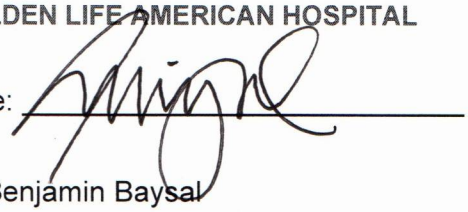
10. ENTIRE AGREEMENT AND PRIOR PROTOCOLS

This Protocol constitutes the entire agreement between the Parties with respect to its subject matter. It supersedes all prior agreements, communications, and understandings between the Parties, including the Collaboration Protocol signed January 15–17, 2026, which is hereby acknowledged as the foundation of this relationship and retired upon execution of this document.

Any amendment to this Protocol must be made in writing, signed by authorized representatives of both Parties, and designated as a numbered addendum attached hereto.

SIGNATURES

By signing below, the authorized representatives of each Party confirm that they have read, understood, and agreed to all terms of this Long-Term Collaboration Protocol, and that they are authorized to bind their respective organizations.

FOR CLEARVISION GLOBAL HEALTH, INC.	FOR GOLDEN LIFE AMERICAN HOSPITAL
Signature: 	Signature: 
Name: Eren Coban	Name: Benjamin Baysal

Title: Founder & Executive Director Date: 06-13/26 Address: 17422 Straloch Lane Richmond, Texas 77407, USA Email: eren@clearvisionglobalhealth.org Web: clearvisionglobalhealth.org	Title: Chief Executive Officer Date: 06/13/2026 Address: Badalabougou, Rue 50, Porte 734 Bamako, Mali Tel: +223 20 22 11 11 · +223 20 22 99 99 Web: glahospital.com