

Order Form

Framework agreement reference: SBS/19/AB/WAB/9411

Date of order	14 th March 2025	Order Number	XXXXXXXXXXXX
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FROM

Customer	UK Shared Business Services Limited (UKSBS) "Customer"
Customer's Address	Polaris House, North Star Avenue, Swindon, SN2 1FF
Invoice Address	UK Shared Business Services Polaris House, North Star Avenue, Swindon, SN2 1FF XXXXXXXXXX
Contact Ref:	Name: XXXXXXXX XXXXXXXXXXXX Address: UKSBS Polaris House North Star Avenue Swindon, SN2 1FF

TO

Supplier	Dell Corporation Ltd "Supplier"
Supplier's Address	c/o 1st & 2nd Floor, One Creechurch Place, London, EC3A 5AF
Account Manager	XXXXXXXXXX Dell Corporation Ltd c/o 1 st & 2 nd Floor, One Creechurch Place, London EC3A 5AF XXXXXXXXXX

GUARANTEE

Guarantee to be provided	No
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Where a guarantee is to be provided then this Contract is conditional upon the provision of a Guarantee to the Customer from the Guarantor in respect of the Supplier. Details of the Guarantor (if any) are set out below:

[Parent Company	N/A	"Guarantor"
Parent Company address	N/A	
Account Manager	N/A	

1. TERM

(1.1) Commencement Date The contract shall commence on 14th March 2025

(1.2) Expiry Date

The Contract shall expire on the 14th March 2028. There is an element of basic onsite service, ProSupport and next day onsite service for XXXXX after the Commencement Date

2. GOODS AND SERVICES REQUIREMENTS

(2.1) Goods and/or Services

The customer agrees to purchase all its requirements for the goods or equivalent goods from the supplier. As per quote [REDACTED]

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(2.2) Premises UK Shared Business Services Limited Polaris House, North Star Avenue, Swindon, SN2 1FF
(2.3) Lease/ Licenses N/A
(2.4) Standards N/A
(2.5) Security Requirements Security Policy N/A Additional Security Requirements N/A Processing personal data under or in connection with this contract NO
(2.6) Exit Plan N/A
(2.7) Environmental Plan NO

3. SUPPLIER SOLUTION
(3.1) Supplier Solution As per quote XXXXXXXXXXXXXXXXXX
(3.2) Account structure including Key Personnel Customer: XXXXXXXXXXXXXXXXXX Supplier: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
(3.3) Sub-contractors to be involved in the provision of the Services and/or Goods N/A
(3.4) Outline Security Management Plan N/A

(3.5) Relevant Convictions N/A
(3.6) Implementation Plan N/A

4. PERFORMANCE QUALITY
(4.1) Key Performance Indicators N/A
(4.2) Service Levels and Service Credits N/A

5. PRICE AND PAYMENT
(5.1) The total Call-off contract value shall be £85,800.00 excluding VAT as per breakdown. Price validity and duration shall be as per quote XXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXX
(5.2) Invoicing and Payment The Supplier shall issue invoices upon shipment of the goods. The Customer shall pay the Supplier within thirty (30) days of receipt of a Valid Invoice, submitted in accordance with this paragraph 5.2, the payment profile set out in paragraph 5.1 above and the provisions of the Contract. Please ensure that the Purchase Order number is quoted on all invoicing. Invoices to be submitted to, UK Shared Business Services, Polaris House, Swindon, Wiltshire, SN2 1FF. Emails sent to: XXXXXXXXXXXXXXXXXX

6. SUPPLEMENTAL AND/OR ADDITIONAL CLAUSES
(6.1) Supplemental requirements N/A

BY SIGNING AND RETURNING THIS ORDER FORM THE SUPPLIER AGREES to enter a legally binding contract with the Customer to provide the Goods and/or Services. The Parties hereby acknowledge

and agree that they have read the NHS SBS DWS Framework SBS/19/AB/WAB/9411 Conditions of Contract for purchase of goods and/or Services and by signing below agree to be bound by the terms of this Contract.

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