

**RM971 NON MEDICAL NON CLINICAL  
CALL OFF SCHEDULE 13: VARIATION FORM**

Variation Form No: 001

**Contract Ref. Share Your Experience – Delivery Manager – CQC PSO193 PO 275024880**

**BETWEEN:  
The Care Quality Commission ("the Customer") and  
Investigo Ltd ("the Supplier")**

**Buyer:** [REDACTED]

1. This Call Off Contract is varied as follows and shall take effect on the date signed by both Parties:

**This variation details the extension and new target end date of the sub-contract of via Investigo;**

- **The start date of this contract variation is 28/06/2019 and runs until 4/10/2019. This may be extended further and this would be agreed between the Customer and the Supplier no later than three weeks before the target end date.**
2. Words and expressions in this Variation shall have the meanings given to them in this Call Off Contract.
3. This Call Off Contract, including any previous Variations, shall remain effective and unaltered except as amended by this Variation.

Signed by an authorised signatory for and on behalf of the Customer

Signature [REDACTED]

Date [REDACTED]

Name [REDACTED]

Position Head of Product and Delivery

Signed by an authorised signatory to sign for and on behalf of the Supplier

Signature [REDACTED]

Date [REDACTED]

Name [REDACTED]

Position [REDACTED]