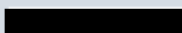
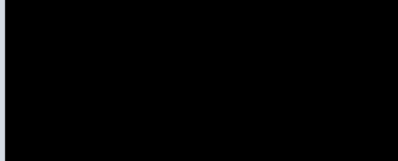


ORDER FORM		
Commencement Date	Wednesday 11 th October 2023	CONTRACT NO – PROC-654-2023
Expiry Date	31 st March 2025	
Extension	<input checked="" type="checkbox"/> No	
Award Letter	<input checked="" type="checkbox"/> Letter dated [TBC] between the Campbell Tickell and the CMA <input type="checkbox"/> Not applicable	
Supplier	[Supplier] incorporated and registered in England and Wales with company number 4713939 whose registered office is at 5 Technology Park, Colindeep Lane, Colindale, London, United Kingdom, NW9 6BX	
Buyer	Competition and Markets Authority, The Cabot, 25 Cabot Square, London, E14 4QZ	
Deliverables	Services <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
Specification	The specification of the Deliverables is as set out in Schedule 1.	
Charges	<p>1. Pricing mechanism: The Price for the Deliverables shall be calculated as set out in Schedule 2 (Charges) of the Agreement.</p> <p>2. Costs and Expenses: The Supplier shall not be entitled to recover its costs and expenses in addition to the above Price.</p> <p>3. Review of the Price: The Price shall not be subject to review during the Term].</p> <p>5. Payment Profile: The Price shall be invoiced in accordance with Clause 6 (Fees and Payment) .</p>	
Cap on data protection liability	The cap on data protection liability shall be: as set out in Clause 12.3 of the Agreement	
Warranty Period	N/A	
Key Personnel	To be completed at award	
	CMA	Supplier

Authorised Representatives	CMA's Representative: <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Title: Director of Executive Office and Performance Email: <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div>	Supplier's Representative: <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Laystall House (2nd and 3rd Floor), 8 Rosebery Avenue, London, EC1R 4TD Title: Partner Email: <div style="background-color: black; width: 150px; height: 15px; display: inline-block;"></div>
Payment	Invoices shall be raised in accordance with Clause 6 of the Agreement. Purchase Order Number: If the Purchase Order Number is not known at the Commencement Date, the CMA will send the Supplier the Purchase Order Number as soon as possible thereafter. The Supplier must be in receipt of a valid Purchase Order Number before submitting an invoice. All invoices must be sent, quoting a valid Purchase Order Number, to: <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> Any query regarding an outstanding payment please contact the CMA's Finance Team using the following information: Finance.Team@cma.gov.uk <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div>	
Supplier's Account Details	Payments to the Supplier will be made to: Bank <div style="background-color: black; width: 100px; height: 15px; display: inline-block;"></div> Account name: Campbell Tickell Ltd Account number: <div style="background-color: black; width: 100px; height: 15px; display: inline-block;"></div> Sort code: <div style="background-color: black; width: 100px; height: 15px; display: inline-block;"></div> Remittances to: <div style="background-color: black; width: 150px; height: 15px; display: inline-block;"></div>	
Contract and Service Management	The Supplier must provide the following formal progress reports: <div style="background-color: black; width: 100px; height: 15px; display: inline-block;"></div> <div style="background-color: black; width: 100px; height: 15px; display: inline-block;"></div> as per Clause 9.1 of the Agreement.	
Insurances	The Supplier must maintain: <input checked="" type="checkbox"/> the insurance policies and cover set out in Clause 13 of the Agreement	
Commercially Sensitive Information	Commercially Sensitive Information shall be as set out in Schedule 5 (Commercially Sensitive Information)	
Applicable Schedules	Optional Schedules (tick if relevant): <input checked="" type="checkbox"/> Description of Services and Service Levels (Schedule 1 Part A) <input type="checkbox"/> Description of the Goods and specifications (Schedule 1 Part B) <input checked="" type="checkbox"/> Charges Schedule (Schedule 2) <input checked="" type="checkbox"/> Supplier Response (Schedule 3) <input type="checkbox"/> The CMA's Equipment (Schedule 4)	

	<input checked="" type="checkbox"/> Commercially Sensitive Information (Schedule 5) <input checked="" type="checkbox"/> Data Protection (Schedule 6) <input type="checkbox"/> Staff Transfer (Schedule 7)
Key sub-contractors	The key sub-contractor(s) for the purposes of the Agreement shall be: [insert legal entity name] incorporated and registered in England and Wales with company number [insert number] whose registered office is at [insert address] <input checked="" type="checkbox"/> Not applicable
Staff Transfers	<input checked="" type="checkbox"/> Not applicable

Signed for and on behalf of the Supplier	Signed for and on behalf of the CMA
Name:  Partner	Name:  
Date: 17/10/2023	Date:
Signature: 	Signature: 

Where appropriate, this Order Form may be signed electronically by both Parties.