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File Ref: PO 8473

Date: 28 June 2019

Contract Amendment No: 1

CONTRACT FOR: Expanding Social Protection Uganda – Bridging Contract

CONTRACT NUMBER: PO 8473

With reference to the contract dated 22 February 2019, with reference to your approach paper for the extension phase, both Parties have in principle agreed to the following variations to the Contract:

Section 4 Appendix A

1	. Commencement	and Duration	of the Services
	. Commencement	and Duration	OI LITE SELVICE

Delete:
30 June 2019 ("the End Date")

Insert:

30 November 2019 ("the End Date")

3. Financial Limit:

Delete:

£1,257,251 ("the Financial Limit")

Insert:

£2,255,194 ("the Financial Limit")

4. DFID Officials and Key Personnel

Delete:

REDACTED

Insert:

REDACTED

Delete:





4.4. In-Country Leadership Team REDACTED

7. Additional Documents to be included in the contract.

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Approach Paper: Expanding Social Protection - Bridging Period - Contract Extension - REDACTED

Section 4, Appendix A, Annex B

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Expanding Social Protection - DFID Full Budget - REDACTED

Five Month Extension Budget - REDACTED

Invoice Schedule - REDACTED

Fund Manager - Leadership Team - REDACTED

Fund Manager Staff - REDACTED

PMU - REDACTED

OPM Project Support - REDACTED

ESP Insurance - REDACTED

- 1. This amendment relates to a five (5) month costed extension to the Expanding Social Protection Uganda Bridging Contract. The contract financial limit will increase by £997,944.
- 2. Please confirm in writing by signing and returning one copy of this letter, within **15 working days** of the date of signature on behalf of DFID that you accept the variation[s set out herein.
- 3. The Contract, including any previous variation, shall remain effective and unaltered except as amended by this letter.
- 4. Words and expressions in this letter shall have the meanings given to them in the Contract.

Signed by an authorised signatory for and on behalf of the Secretary of State for International Development	Name:
or the decretary of diate for midmaterial perciopment	Position:
	Signature:
	Date:
Signed by an authorised signatory for and on behalf of the Supplier	Name:
Сиррпсі	Signature:
	Date: