Joint Schedule 2 (Variation Form)

This form is to be used in order to change a contract in accordance with Clause 24 (Changing the Contract)

	Contract Details	
This variation is between:	UK Research & Innovation (UKRI) (the "Contracting Authority")	
	And	
	Sanderson Government & Defen	ice Ltd ("the Supplier")
Contract name:	THE SUPPLY OF NON CLINICA ("the Contract")	L STAFFING RM6277 CALL OFF
Contract reference number:	CS21548	
	Details of Proposed Variation	
Variation initiated by:	UK Research & Innovation (UKR	d)
Variation number:	004	
Date variation is raised:	06/02/2025	
Proposed variation	To extend the original contract e	nd date.
Reason for the variation:	To extend the contractor's end date from 28th February 2024 to 30th May 2025.	
An Impact Assessment shall be provided within:	N/A	
	Impact of Variation	
Likely impact of the proposed variation:	Low	
	Outcome of Variation	
Contract variation:	This Contract detailed above is varied as follows:	
	PMO Planner	
	Contract Start Date: 1st November 2021	
	Contract end date shall be extended to: 30th May 2025	
		at additional working days = total contract variation shall not AT.
Financial variation:	Original Contract Value:	£123,680.25 excluding VAT.
	Additional cost due to variation 001:	£164,085.75 excluding VAT.
	Additional cost due to variation 002:	£67,915.90 excluding VAT.
	Additional cost due to variation 003:	£66,348.61 excluding VAT.
	Additional cost due to variation 004:	£31,874.33 excluding VAT
	New Contract value:	£453,904.84 excluding VAT.

Framework Ref: RM6277 Project Version: v1.0 Model Version: v3.1

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- This Variation must be agreed and signed by both Parties to the Contract and shall only be effective from the date it is signed by the Contracting Authority.
- 2. Words and expressions in this Variation shall have the meanings given to them in the Contract.
- 3. The 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 Contracting Authority

Signature	
Date	
Name (in Capitals)	
Address	
Signed by an authorised	signatory to sign for and on behalf of the Supplier
Signed by an authorised Signature	signatory to sign for and on behalf of the Supplier
	d signatory to sign for and on behalf of the Supplier
Signature	d signatory to sign for and on behalf of the Supplier
Signature Date	d signatory to sign for and on behalf of the Supplier

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