

SUPPLEMENTAL STATEMENT OF WORK

THIS COMPLETED FORM SHOULD BE SUBMITTED AS AN INTERNAL ATTACHMENT TO A CHANGE REQUEST IN UD EXCHANGE

Provide the details regarding the changes to the existing Statement of Work (SOW). Description of change(s) should clearly outline new dates if an extension, the changes and/or additions to the services including any deliverables, and the revised Fee, if applicable. If all or part of the details are provided on Supplier's letterhead, indicate "see attached" in each appropriate section below, and attach the documentation hereto, which shall be incorporated herein.

PURCHASE ORDER #:		REVISED END DATE OF ENGAGEMENT (if extended):		
UD BUSINESS UNIT:		SUPPLIER/CONSULTANT NAME:		
OD BOSINESS UNIT:		SUPPLIER/CONSULTANT NAME:		
DETAILED DESCRIPTION OF CHANGE/ADDITION TO SERVICES (attach additional sheets, if necessary):				
DETAILED DESCRIPTION OF STANDERADDITION TO SERVICES (URden additional shocks, if hosessary).				
DETAILED LIST OF CHANGES/ADDITIONS TO DELIVERABLES (e.g., report, presentation, data analysis, drawings, etc.), including any				
milestones:				
FEES & EXPENSES				
The University agrees to pay Supplie	er a revised fee, detailed below, the	total amount due upon completion of all Services and acceptance of a		
deliverables, unless the Parties agree to a payment schedule detailed below. If all or part of the details are provided on Supplier's letterhead, indicate				
"see attached" in each appropriate section below, and attach the documentation hereto, which shall be incorporated herein.				
TOTAL FEE TO BE PAID:	\$	(Original PO amount \$+supplement amount \$		
Daywood 4	Payment Schedu			
Payment 2	Due Date:	\$		
Payment 2 Payment 3	Due Date: Due Date:	\$ \$		



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	The University DOES NOT AGREE to separately reimburse Su	applier for any expenses.	
	OR		
	The University agrees to reimburse Supplier for the reasonable expenses. If the University agrees to pay for reasonable expenses, Supplier shall provide the University with the expense detail, including original receipts for reimbursement of actual expenses incurred, in accordance with applicable the University's travel and business expense policies. The University will reimburse Supplier the following detailed expense type(s) (e.g., transportation, hotel, meals, etc.) up to the estimated amount(s) <i>below</i> :		
Delaware Condition conditions	e's Standard Terms and Conditions set forth at https://www.ns"). Transactions performed under this SSOW will be con	SOW"), adopts and incorporates by reference the University of w1.udel.edu/procurement/supinfo/tc/index.html (the "Terms & inducted in accordance with and be subject to the terms and alized terms used but not defined in this SSOW shall have the	
Purchase of this Ag	Order. Any variance from or addition to the Supplementa	Parties and incorporated into the issuance of a University al Statement of Work, Fees and Expenses, or Terms & Conditions ent delivered by Supplier will be void and of no effect unless	
	IN WITNESS WHEREOF, the Parties hereto have caused e duly authorized officers as of the Date set forth below:	d this Agreement to be executed on their behalf by their	
SUPPLI	ER:	UNIVERSITY OF DELAWARE:	
BY:		BY:	
TITLE:		TITLE:	
DATE:		DATE:	