

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

1. CONTRACT ID CODE

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2. AMENDMENT/MODIFICATION NO. 0001		3. EFFECTIVE DATE March 05, 2021		4. REQUISITION/PURCHASE REQ. NO. PR95511116		5. PROJECT NO. (If applicable)	
6. ISSUED BY U.S. Embassy Nairobi, Kenya P.O. Box 606-00621, Village Market				7. ADMINISTERED BY (If other than Item 6) CODE			
8. NAME AND ADDRESS OF CONTRACTOR (NO. street.city.county.State.and ZIP Code)						9a. AMENDMENT OF SOLICITATION NO. 19KE5021R0002	
						9b. DATED (SEE ITEM 11) January 21, 2021	
						10a. MODIFICATION OF CONTRACT/ORDER NO.	
						10b. DATED (SEE ITEM 13)	
11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS							
<p><input checked="" type="checkbox"/> The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers <input type="checkbox"/> is extended, <input checked="" type="checkbox"/> is not extended</p> <p>Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning <u>3</u> copies of the amendment;(b) By acknowledging receipt of this amendment on each copy of the offer submitted; or(c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers.</p> <p>FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.</p>							
12. ACCOUNTING AND APPROPRIATION DATA (If required)							
13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.							
A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.							
B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b)							
C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:							
D. OTHER (Specify type of modification and authority)							
E. IMPORTANT: Contractor <input type="checkbox"/> is not, <input checked="" type="checkbox"/> is required to sign this document and return _____ copies to the issuing office.							
14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)							
<p>A. The solicitation is amended as follows;</p> <p>i. To correct block #3 of the SF33 form to read "19KE5021R0002".</p> <p>B. To insert under Exhibit A as follows;</p> <p>i. Table 2. Group Life & Disability Claims Register.</p> <p>ii. Table 3. Group Life & Disability Data.</p> <p>C. To insert under Exhibit B as follows;</p> <p>i. Table 4. Group Life & Disability Data by Gender.</p> <p>ii. Table 5. Group Life & Disability Data.</p> <p>Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.</p>							
15A. NAME AND TITLE OF SIGNER (Type or print)				16A. NAME OF CONTRACTING OFFICER Aisha O'Neal			
15B. NAME OF CONTRACTOR/OFFEROR BY (Signature of person authorized to sign)		15C. DATE SIGNED		16B. UNITED STATES OF AMERICA BY (Signature of Contracting Officer) //Signed//		16C. DATE SIGNED Mar 05, 2021	

SOLICITATION, OFFER AND AWARD		1. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 350)	RATING	PAGE OF PAGES 1
CONTRACT (Proc. Inst. Ident.) NO.	3. SOLICITATION NO. 19KE5021R0002	4. TYPE OF SOLICITATION <input type="checkbox"/> SEALED BID (IFB) <input checked="" type="checkbox"/> NEGOTIATED (RFP)	5. DATE ISSUED 2/16/2021	6. REQUISITION/PURCHASE NO.
ISSUED BY S. American Embassy Nairobi		8. ADDRESS OFFER TO (If other than item 7)		

NOTE: In sealed bid solicitation "offer" and "offeror" mean "bid" and "bidder".

SOLICITATION

Sealed offers in original and 2 copies for furnishing the supplies or services in the Schedule will be received at the place specified, in the depository located in See Section L until 2/18/2021 local time 1600 hours.
(date) (hour)

ATTENTION - LATE Submissions, Modifications, and Withdrawals: See Section L. Provision No. 52.215-1. All offers are subject to all terms and conditions contained in this solicitation.

FOR INFORMATION CALL: Contracting Specialist	A. NAME Eric Kamau	B. TELEPHONE (NO COLLECT CALLS) +2543636000	C. E-MAIL ADDRESS NairobiGSO-Contracts@state.gov
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OFFER (Must be fully completed by offeror)

NOTE: ITEM 12 does not apply if the solicitation includes the provisions at 52.214-16, Minimum Bid Acceptance Period.

In compliance with the above, the undersigned agrees, if this offer is accepted within _____ calendar days (120 calendar days unless a different period is inserted by offer) from the date for receipt of offers specified above, to furnish any or all items upon which prices are offered at the price set opposite each item, delivered at the designated int(s), within the time specified in the schedule.

DISCOUNT FOR PROMPT PAYMENT SEE 14 (see section I, Clause No 52.232-8)	10 CALENDAR DAYS	20 CALENDAR DAYS	30 CALENDAR DAYS	CALENDAR DAYS
	%	%	%	%

ACKNOWLEDGMENT OF AMENDMENTS The offeror acknowledges receipt of amendments to this solicitation and related documents) numbered and dated:	AMENDMENT NO.	DATE	AMENDMENT NO.	DATE

A. NAME AND ADDRESS OFFEROR	CODE	FACILITY	16. NAME AND TITLE OF PERSON AUTHORIZED TO SIGN OFFER (Type or print)
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B. TELEPHONE NO. (Include area code)	15C. CHECK IF REMITTANCE ADDRESS [] IS DIFFERENT FROM ABOVE - ENTER SUCH ADDRESS	17. SIGNATURE	18. OFFER DATE
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AWARD (To be completed by Government)

19. ACCEPTED AS TO ITEM NUMBERED	20. AMOUNT	21. ACCOUNTING AND APPROPRIATION
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22. AUTHORITY FOR USING OTHER THAN FULL AND OPEN COMPETITION: <input type="checkbox"/> 10 U.S.C. 2304(c) () <input type="checkbox"/> 41 U.S.C. 253(c) ()	23. SUBMIT INVOICES TO ADDRESS SHOWN IN (4 copies unless otherwise specified)	ITEM
24. ADMINISTRATION BY (If other than Item 7) CODE	25. PAYMENT WILL BE MADE BY CODE	

26. NAME OF CONTRACTING OFFICER (Type or print)	27. UNITED STATES OF AMERICA (Signature of Contracting Officer)	28. AWARD DATE
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IMPORTANT - Award will be made on this form, or on the Standard Form 26, or by other authorized official written notice.

EXHIBIT A – EMPLOYEE STATISTICS

1. EMPLOYEES BY GENDER WITHIN AGE RANGES (GROUP LIFE & DISABILITY INSURANCE)- Table 1

FEMALE		MALE	
Age (years)	Number	Age (years)	Number
20-34	20	20-34	35
35-45	163	35-45	215
46-55	116	46-55	212
56-65	38	56-65	96
TOTAL	337	TOTAL	558

2.GROUP LIFE AND DISABILITY CLAIMS REGISTER- Table 2

Group Life & Disability All Claims Notified								
	MEMBER NAME	Age at the time of death/ Disability	INCIDENT	SUM ASSURED (as per register of lives) in Kenya Shillings				
				Group Life	Group Disability Income	Accelerated Group Life Insurance benefit (100,000)	Funeral Benefit	TOTAL
2015/2016								
1	Employee A	60	DEATH	4,458,816		100,000	50,020	4,508,836
2	Employee B	52	DEATH	4,297,173		100,000	50,020	4,347,193
3	Employee C	54	DISABILITY		3,377,355			3,377,355
Totals				8,755,989	3,377,355	200,000	100,040	12,233,384
2017/2018								
1	Employee D	36	DEATH	5,823,189		100,000	50,020	5,873,209
2	Employee E	52	DEATH	5,232,616		100,000	50,020	5,282,636
3	Employee F	49	DEATH	6,756,885		100,000	50,020	6,806,905
Totals				17,812,690		300,000	150,060	17,962,750
2018/2019								
1	Employee G	30	DEATH	7,181,937		100,000	50,020	7,231,957
2	Employee H	53	DEATH	4,985,451		100,000	50,020	5,035,471
Totals				12,167,388		200,000	100,040	12,267,428
2019/2020								
1	Employee I	36	DEATH	8,717,847		100,000	50,020	8,767,867
2	Employee J	64	DEATH	9,078,942		100,000	50,020	9,128,962
3	Employee K	52	DEATH	16,337,904		100,000	50,020	16,387,924
Totals				34,134,693		300,000	150,060	34,284,753
Prem 2015/2016								
Claims		21,824,049.00						
Claims 2015/2016		12,233,384.00						
Claims Ratio in %age		56						
Prem 2016/2017								
Claims		24,078,350.00						
Claims 2016/2017		0						
Claims Ratio in %age		0						
Prem 2017/2018								
Claims		25,465,429.00						
Claims 2017/2018		17,962,750.00						
Claims Ratio in %age		71						
Prem 2018/2019								
Claims		25,159,733.00						
Claims 2018/2019		12,267,428.00						
Claims Ratio in %age		49						
Prem 2019/2020								
Claims		26,578,811.00						
Claims 2019/2020		34,134,693.00						
Claims Ratio in %age		128						

3.GROUP LIFE AND DISABILITY DATA – Table 3 see attached

EXHIBIT B - ORE EMPLOYEES RIDER

1. EMPLOYEES BY GENDER WITHIN AGE RANGES (GROUP LIFE & DISABILITY INSURANCE)- Table 4

FEMALE		MALE	
Age (years)	Number	Age (years)	Number
20-34	1	20-34	0
35-45	1	35-45	1
46-55	2	46-55	1
56-65	0	56-65	0
TOTAL	4	TOTAL	2

2. GROUP LIFE AND DISABILITY DATA ORE- Table 5

	Gender	Age	Monthly Salary BR	Annual BR Kenya Shillings	Monthly Misc Kenya Shillings	Annual Misc Pay Kenya Shillings
1	FEMALE	33	37,000	444,000.00	17,900	214,800.00
2.	FEMALE	42	40,734	488,808.00	19,517	234,204.00
3.	FEMALE	48	41,781	501,372.00	19,219	230,628.00
4.	FEMALE	48	70,800	849,600.00	0	-
5.	MALE	39	48,134	577,608.00	21,784	261,408.00
6.	MALE	51	30,000	360,000	15,000	180,000.00