

PS Project Name:

## Statement of Services Change Order Authorization

Case File Scanning Project

MSSA Data (if Applicable):	Not Applicable		
Change Order Number:	001		
Business Solutions, Inc. ("TABS") Commercentre Drive, Lake Forest, ADDRESS"), collectively "parties". between the Parties as of the Effec	, including its division <b>Tos</b> CA 92630, and [ <b>CUSTOMER</b> ] This COA is hereby incorpositive Date below. This COA is in accordance with the term	hiba  , loca   orate   shall   ms of	d by reference into the Statement of Services ("SOS") continue in effect until the termination or expiration of the SOS or as indicated herein. Parties agree that this
Effective Date:			
Purpose of Change:			
documents should  Each document for converted.  To accomplish this box to identify surprocess.  Invoices related to this project accommodate this change each	end preapproved SOW to  3 boxes contain CCH and d not be scanned. bund needs to be identified s, it will take approximate ch documents and exclude t will reflect a separate line th month until completion M0403 – ADDITIONAL PRE	add CJIS ed, p ely the e the ne ite	the following services:  documents. These two types of  ulled and set aside not to be  nirty-five (35) minutes (labor) per em from the scanning conversion  em indicating the total hours incurred to the project. The line item will be billed according ABOR being \$45.00 per hour for approximately 793
Pricing:			
Facsimile and electronic signature			
The Parties have caused this COA they are duly authorized to execu			al whose signature appears below hereby warrants that y they represent:
TOSHIBA			CUSTOMER
Printed Name:			Printed Name:

## **TOSHIBA**

Signature:	Signature:
Title:	Title:
Date:	Date: