# **Sample Change Order Form**

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| **Change Order No:** | **Change Order to Work Authorization Date:** | | |
| **Change Order Date:** |
| **Project Name:** | **Project No:** | | |
| **Client:** | | | |
| *Your company name here*: | | Client: | |
| Name & Title: | | Name & Title: | |
| Signature: | | Signature: | |
| Date: | | Date: | |
| **Description of services and payment terms** (as applicable) | | | |
|  | | | |
| **Anticipated change to Delivery Schedule** (as applicable): | | | |
|  | | | |
| Value of this Change Order | | |  |