



CONTRACT# _____

CITY OF OCALA CONTINUING PROFESSIONAL SERVICES CONTRACT WORK ORDER

WORK ORDER NUMBER # _____

EFFECTIVE DATE: _____

Contracting Officer
Approval/Initials

Project Title:

To:

Attn:

FUNDING SOURCE: _____

EXPENDITURE
ACCOUNT NUMBER:

In accordance with your executed City Council Agreement, you are hereby authorized to commence the work outlined in the attached scope of work. The approved work order amount as a maximum limiting amount shall not to exceed \$ _____. Completion time for the work shall be as stipulated by the airport director. An expiration of the Master Agreement, through no fault of either party, shall not relieve the Consultant of their obligation for completing the tasks identified herein to the satisfaction of the city.

Requested By: _____ Date: _____
Department Director

Approved By: _____ Date: _____
City Council President