

**EXHIBIT {A}**

**AUTHORIZATION NO. {NUMBER} TO PERFORM SERVICES**

for the  
PROFESSIONAL SERVICES AGREEMENT  
between  
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA  
and

**{CONSULTANT or LABORATORY NAME}**  
made on **{PSA EXECUTION DATE}**

(Note: Order Period is from **{ORDER PERIOD START DATE}** through **{ORDER PERIOD END DATE}**)

**I. IN ACCORDANCE WITH THE TERMS OF THE AGREEMENT ABOVE, YOU ARE HEREBY AUTHORIZED TO PERFORM THE FOLLOWING SERVICES:**

**{DETAIL THE SPECIFIC SERVICES TO BE PERFORMED.}**

**II. COMPENSATION SHALL BE MADE IN ACCORDANCE WITH THE CONSULTANT RATE SCHEDULE AND REIMBURSEMENT SCHEDULE IN THIS AGREEMENT, AND SHALL NOT EXCEED **{ \$ AMOUNT IN FIGURES }****

**III. SERVICES AUTHORIZED TO BE COMPLETED WITHIN **{AMOUNT OF TIME: e.g. number of days, by a specific date.}****

**IV. LOCALITY FOR PERFORMANCE OF WORK**

The locality for the performance of construction, alteration, demolition or repair work as defined in Section 1720 of the State of California Labor Code for the purposes of Article VI of the Agreement will be:

**{Location identified should be the actual location of the Project (e.g. University of California, {FACILITY}, street address, if any, and city, county)}**

This Authorization has been executed on the **{DATE}** day of **{MONTH}**, **{YEAR}**.

CONSULTANT

**{FIRM NAME}**  
By: **{NAME}**  
**{TITLE}**

(Signature)

CONSULTANT ADDRESS { }

CONSULTANT FACSIMILE NUMBER { }

UNIVERSITY

THE REGENTS OF THE UNIVERSITY OF CALIFORNIA

By: {NAME}  
{TITLE}

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(Signature)

UNIVERSITY ADDRESS { }

UNIVERSITY FACSIMILE NUMBER { }