## **PURCHASE ORDER CHANGE FORM**

**Purchasing Department** 

\*\*\*\*\*THIS FORM TO BE SENT TO THE PURCHASING DEPARTMENT\*\*\*\*

(Fiscal will forward to Purchasing after they approve the changes)

REQUI		E: <u>Janet Richa</u> e & Operation	erdson EXT. # <u>3804</u> s PO <u># <b>210687</b> VENDOR NAM</u>		<u>-</u>	l.org
		APPROPRIAT	TELY: Cancel PO Chang  For Change: INCREASE	e PO (fill out appl		•
	_Add or D	elete Line It	em(s)			
Line Item	Add or Quantity Delete Change		Description	Price	_	Budget Code to be Charged
				\$		-
				\$		
Line Item	Quantity	New Quantity (if applies)	Description of change	Price	Budget Code to be Charged:	
1	LOT		INCREASE AMOUNT	\$ 35,000. 00	01.8150.0000.8110.51100000. 551.014.5651	
SITE/Department Head Approval  Budget Administrator Approval					[G	DJUSTED PO Grand Total
Fiscal Approval				Date:	<u></u>	130.000.00