

PURCHASE ORDER CHANGE FORM

DATE: _____
DEPARTMENT _____
PO# _____

VENDOR _____

CHECK APPROPRIATE LINE(S) AND ATTACH COPY OF PO

CHANGE ACCOUNT # _____

INCREASE PO _____

ADD LINE _____

DESCRIPTION _____

DECREASE PO _____

CANCEL _____

CLOSE _____

REOPEN PO _____

Amount to Be Encumbered \$ _____

VENDOR NAME (change to) _____

Reason for Increase/Decrease _____

Requested By Date _____

Processed By Date _____

Approved BY Date _____
School Busines Administrator