

REQUEST FOR MODIFICATION/CANCELLATION

TO: PURCHASING DEPARTMENT

ATTN: _____

PURCHASE ORDER # _____

DATE: _____

REQUESTED BY: _____

SCHOOL/DEPT: _____

VENDOR: _____

Does Vendor need copy of updated PO? Yes

No

Price Increase: (If price increase on more than one line, note in comment section)

Line # _____ Unit was: \$ _____ Is now: \$ _____

Quantity Change: (If quantity change on more than one line, note in comment section)

Line # _____ Qty was: _____ Is now: _____

Increase/Decrease Blanket Purchase Order

Total was \$ _____ Is now: \$ _____

Request to Cancel in Total

Reason:

Request to Cancel Line Item(s):

Line #/#s: _____

Reason:

Vendor Required Pre-Payment (Change PO to Payment Enclosed)

Attach Invoice/Statement indicating payment due

Other: (e.g. Change account)

Comment:

Note: Please save Modification/Cancellation form as PDF and email to Purchasing Department at: purchasing@k12northstar.org.

This form is for internal use only. DO NOT MAIL/FAX/EMAIL TO VENDOR