

REQUEST FOR CHANGE ORDER

Prepared By _____ Telephone No. _____ Date _____

Delivery Site: CCC DIST GWC KOCE OCC

CHANGES TO THE ORIGINAL ORDER

- _____ OTHER
- _____ EXTEND VALID DATE
- _____ CANCEL ENTIRE ORDER
- _____ CANCEL ITEMS
- _____ CHANGE DESCRIPTION
- _____ ADD SHIPPING
- _____ ADDITIONAL ITEMS
- _____ CHANGE PRICING
- _____ CHANGE DELIVERY DATE
- _____ CHANGE QUANTITY
- _____ CHANGE BUDGET NUMBER
- _____ ADD BUDGET NUMBER
- _____ INCREASE DOLLAR AMOUNT
- _____ DECREASE DOLLAR AMOUNT

VENDOR INFORMATION

NAME _____

ADDRESS _____

CITY _____

ATTENTION _____

OUR P.O. NUMBER _____ DATE OF P.O. _____ CHANGE MADE BY _____

ITEMS BELOW REFLECT CHANGES ONLY

ITEM	QUANTITY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL PRICE

REQUEST FOR CHANGE ORDER

BUDGET NUMBERS

	PREVIOUS TOTAL	
	CHANGE AMOUNT	
	TAX	
	NEW P.O. TOTAL	

VENDOR NUMBER _____

APPROVALS

ADMINISTRATOR/MANAGER _____

FUNDED PROJECT _____

PRESIDENT, VICE PRESIDENT ADMINISTRATIVE SERVICES, OR VICE CHANCELLOR _____

FOR PURCHASING USE ONLY

DO NOT WRITE IN THIS AREA

APPROVED BY _____ DATE _____

ASSIGNED TO _____