

ALABAMA A. & M. UNIVERSITY PURCHASING CHANGE ORDER REQUEST



To: Purchasing Department
After completion and approvals,
send completed form to 109 Patton Hall

Date: _____

From: _____
Dean, Director or Department Head

Dept: _____

Contact Person: _____

Phone: _____

Purchase Order # _____ Vendor Name: _____

_____ Cancel Order _____ Approved invoice(s) attached

_____ Cancel Remaining Balance—Last CK#: _____ Amount _____

_____ Cancel order to accommodate change in vendor

PLEASE MAKE THE FOLLOWING CHANGES:

	Fund	Org	Acct	Prog	%	Amount
Original Approved						
Change/Corrected						
Change/Corrected						
Change/Corrected						

Line Item #: _____ Add new Line Item? Yes _____ No _____

Line Item #: _____ Add new Line Item? Yes _____ No _____

Line Item #: _____ Add new Line Item? Yes _____ No _____

_____ Change Account Code From _____ To _____

_____ Increase _____ Decrease Unit Price From _____ To _____

_____ Increase _____ Decrease Quantity From _____ To _____

_____ Delete _____ Add Item Description _____

Reason for the above change(s)

If a change involves the vendor, purchasing **will** send notification to the vendor.

If a change is internal, the vendor **will not** be notified.

Direct any questions to Purchasing Department 372-5227