PURCHASE ORDER MODIFICATION FORM

Please complete all the information below to initiate a Purchase Order Modification.

Date:

Department:                       Contact Person:

Original Purchase Order No.:                               Requisition No:

Amount of Original P.O.: $                        Vendor:

Amount of Modification:$                         Increase: ____         Decrease: ________

Is this amount being charged to same Department Coding?   Yes:_______ No: _______

If No, what is the new coding: ______________________

Special Instructions to Vendor or Description of Items or Service:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Person Completing Form: ________________________________

Department Head: ______________________________________

06/12/02
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