PURCHASE ORDER ADJUSTMENT REQUEST

TO: Director of Procurement Services

FROM: ________________________________

Department Name: ________________________________

DATE: ________________________________

SUBJECT: ________________________________

SUPPLIER NAME: ________________________________ PURCHASE ORDER # ______

PURPOSE: ________________________________

REQUESTED ACTION:
CIRCLE ONE – ADD LINE

○ Purchase Order Amount $ ______
○ Adjustment Amount $ ______
○ Total Revised Amount $ ______

SOURCE OF FUNDING

Fund: ______
Department: ______
Account: ______
Quantity: ______
Description: ________________________________
Unit Cost: ______

APPROVALS

REQUESTER

SIGNATURE: ________________________________ Requester Date

MANAGER/APPROVER

SIGNATURE: ________________________________ Manager/Approver Date

ACTION TAKEN

BUYER

SIGNATURE: ________________________________ Buyer Date