

**Purchasing Department**

**CHANGE ORDER AUTHORIZATION FORM**

* *This form is for all changes to existing Purchase Orders including; corrections to description, quantity, price, taxes, etc.*
* *Signed and scanned forms via email are acceptable.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| REQUESTOR: |  |  | LR |  |  |  |
| Budget Officer |  |  | PO |  |  |  |
| Signature: |  |  | INDEX |  |  |  |
|  |  |  | ORG |  |  |  |
|  |  |  | ACCOUNT |  |  |  |
| Print Name: |  |  |  |  |  |  |
| Signature: |  |  |  |  |  |  |
|  |  |  |  |  |
|  | Change of Contract |  | Amendments | Change of scope of work |



***(DESCRIBE REASON FOR CHANGE ORDER; PROVIDE ALL APPLICABLE DETAILS)***

For Purchasing Department Only

**C/O DATE:** **C/O SEQ #:** **C/O BY:**