

PO CHANGE ORDER or CONTRACT AMENDMENT REQUEST

Please allow 2-3 weeks for processing.

VENDOR NAME:				
PO Number		ORG Number		
OR				
Contract Number		ORG	Number	
MODIFICATIONS				
DOLLAR AMOUNT:	Increase	Decrease	Not Applicable	
	Amount \$		NEW Total Amount	\$
JUSTIFICATION FOR REC	QUESTED INCREA	SE/DECREASE:		
CHANGE(S): Details of re		• •	-	-
For Contracts: If makin	ng changes to the	e SOW, email the υ	ipdated Word file with	request.
Requested ByPrint Name			F.A	
			Ext	
Signature			Date	
If the dollar amount of t	the Purchase Ordei	r/Contract is being i	increased, a second level	authorization signature is required.
Second Level			Ext	
	Print Name		LXt	
Signature			Date	
	PO Change (Order submission: <u>F</u>	RRCC.PurchaseOrders@rr	<u>cc.edu</u>
			nission: Contracts@rrcc.e	<u>du</u>
			asing Only	
Approved: ☐ Y ☐ N	Ву: С	Date:	Revised Quote: 🗖 Y	□ N Change Order #
Amendment # Exhibit # Option Letter # PO Change Order #				
Department Review	Contro	oller/VP Review	Vendor Review	DocuSign
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