



CANYONS School District

PURCHASE ORDER CHANGE ORDER OR DELETE FORM

SCHOOL/DEPARTMENT: _____ PURCHASE ORDER #: _____

VENDOR NAME: _____ VENDOR CONTACT/PHONE #: _____

REASON FOR DELETION OR CHANGE: _____

Fill in the information below and return to the Purchasing Department through district mail. A copy of the changed PO will be sent to Accounting by Purchasing. If additional room is needed, please attach additional change order form.

SECTION A - ORIGINAL: Describe original item(s) to be changed including original item #, quantity, price, etc.

<u>ITEM</u>	<u>QTY</u>	<u>UNIT PRICE</u>	<u>EXTENDED PRICE</u>

ORIGINAL PO TOTAL: \$ _____

SECTION B - CHANGES: Describe changes to item(s) above such as item #, quantity, price, etc. List items individually, including each item quantity change or price change (list correct prices, not price differences). Please list quantity and price for each item regardless whether that category is revised or not.

<u>ITEM</u>	<u>QTY</u>	<u>UNIT PRICE</u>	<u>EXTENDED PRICE</u>

NEW PO GRAND TOTAL: \$ _____

PRINT YOUR NAME: _____ TELEPHONE #: _____

DIRECTOR/PRINCIPAL SIGNATURE: _____ DATE: _____

FOR PURCHASING DEPARTMENT USE ONLY

REVISER'S INITIALS: _____ DATE OF CHANGE/DELETION: _____

BUYER'S SIGNATURE: _____ DATE: _____

SPECIAL INSTRUCTIONS: _____ RESEND TO VENDOR: Y N