PURCHASE ORDER CHANGE FORM
Purchasing Department
*****THIS FORM TO BE SENT TO THE PURCHASING DEPARTMENT*****

REQUESTOR NAME: **Liz Acevedo**_____ EXT. # **3830**_____ EMAIL: **acevedol@mdusd.org**
SITE: **MAINTENANCE AND OPERATIONS**__ PO#: **250419** VENDOR NAME: **Bay City Mechanical**

CIRCLE SELECTION APPROPRIATELY: Cancel PO   (Change PO) (fill out applicable areas below)

ADD:
_____ **Delete Line Item(s)**

Line Item	Description	Price	Budget Code to be Charged

_____ **Change of Budget Code ONLY (**

Line Item	Change From:	Change To:	Amount
			$

_____ **Change Line Item: Reason required if PO total is increased by 10% or more***

Line Item	Description, Quantity, and/or Price to be changed	Price	Budget Code to be Charged:
		$	

_x_____ **Add Line Item(s) Reason required if PO total is increased by 10% or more***

Line Item	Description	Price	Budget Code to be Charged:
3	Same as line 1	$100,000.00	01.9010.0000.8110.39120000.551.014.5652

*Reason for Change (required if PO total is increased by 10% or more): Increased need for HVAC services.

SITE/Department Head Approval _____ Date: _____	**ADJUSTED PO**	
Budget Administrator Approval _(signature)_ Date: 1/15/25	**Grand Total**	
Fiscal Approval _____ Date: _____	**$414,500.00**	

C/O2: 20180208