PURCHASE ORDER CHANGE FORM

Purchasing Department

*****THIS FORM TO BE SENT TO THE FISCAL SERVICES DEPARTMENT****

(Fiscal will forward to Purchasing after they approve the changes)

DATE:									
REQUESTOR NAME: Deborah Waters EXT. # 3786 EMAIL: watersd @MDUSD.ORG SITE: Foods PO#: 231910 VENDOR NAME: Rumiano Cheese Company Inc.									
SITE: <u>I</u>	Foods		PO#: 231910	VEND	OR NAME:	Run	niano Chee	se Company Inc.	
CIRCLE SELECTION APPROPRIATELY: Cancel PO Change PO fill out applicable areas below) REQUIRED FIELD-Reason for Change: Adding line item and funding for the 2022-23.									
Line Item	Add or Delete	Quantity if Adding	Description		Pi	rice	Budget C	Budget Code to be Charged	
2	Add	1	Quotation Increase # 100001			\$ 188,000.00 (13.5310.0000.3700.6110 0000.509.009.9341	
					\$				
Change of Budget Code ONLY									
Line Item Change From:			Change To:				Amount		
								\$	
								\$	
Change Line Item (list reason for change above)									
Line Item	Quantity New Descri Quantity (if applies)			tion of change		Prio	ce Budget Code to be Charge		
						\$			
						\$			
SITE/E	epartmer	nt Head Appro	val	.	Date:			ADJUSTED PO	
Budget Administrator Approval					Date:			nd Total	
Fiscal Approval Date:							 \$21	2,000.00	

PO Change Form EXSECOPR 2/2016