

Purchase Change Request		Fairmont State University Procurement Office 1201 Locust Avenue Fairmont, WV 26554-2470			Order #
FY	Buyer	Date	Account #	P.O. Date	Contract #
Document: <input type="checkbox"/> Requisition (Cancellation Only) <input type="checkbox"/> Regular Purchase Order <input type="checkbox"/> Contract Purchase Order <input type="checkbox"/> Open End Contract Purchase Order <input type="checkbox"/> Agreement			Purpose of Change (Check boxes applicable): <input type="checkbox"/> Cancellation <input type="checkbox"/> Increase/Decrease <input type="checkbox"/> Unused Balance <input type="checkbox"/> Freight <input type="checkbox"/> Renewal <input type="checkbox"/> Extension Error <input type="checkbox"/> Error in Total Amount <input type="checkbox"/> Change of Account Change or Vendor Name/Address <input type="checkbox"/> Other		
Vendor Name, Address, Phone #, etc.			Spending Unit Name & Address: Fairmont State University Procurement Office 1201 Locust Avenue Fairmont WV 26554-2470		
Item#	Quantity	Description of Change		Unit Price	Extended Price
Change Order # _____					
Reason for Change				Previous Total	\$ _____
				Increase	\$ _____
				Decrease	\$ _____
				New Total	\$ _____

_____ Approved: _____
 Vendor's Signature Authorized Procurement Signature Date

 Department Approval Attorney General (if required) Date