



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 REQUESTED INCREASE/DECREASE:

CHANGE(S): Details of requested change(s) in the Statement of Work (SOW), change of Line Item, etc.
For Contracts: If making changes to the SOW, email the updated Word file with request.

Requested By _____ Ext _____
Print Name

Signature _____ Date _____

If the dollar amount of the Purchase Order/Contract is being increased, a second level authorization signature is required.

Second Level _____ Ext _____
Print Name

Signature _____ Date _____

PO Change Order submission: RRCC.PurchaseOrders@rrcc.edu
Contract Amendment submission: Contracts@rrcc.edu

Purchasing Only

Approved: Y N By: _____ Date: _____ Revised Quote: Y N Change Order # _____
Amendment # _____ Exhibit # _____ Option Letter # _____ PO Change Order # _____
Department Review _____ Controller/VP Review _____ Vendor Review _____ DocuSign _____