



Change Order Request Form

Requestor Name: _____

GUIDELINES

Date: _____

This form is to request a change to an established PO. Please forward the approval from the fund manager or CC the fund manager on the request email.

INSTRUCTIONS

- Attach quote from supplier for requested change
- Submit to procurement@mines.edu

ORIGINAL PURCHASE

Original Purchase Order #:

Supplier Name:

- Discretionary purchase of \leq \$50,000 for goods or services.
- Sole Source / DQ / IFB / RFP
- Contract #:
- Exclusion Type:

1. Please provide a detailed description on the requested change.

FUND INFORMATION

Line #:	Worktag:	Category:	Amount \$:
Line #:	Worktag:	Category:	Amount \$:
Line #:	Worktag:	Category:	Amount \$:
Line #:	Worktag:	Category:	Amount \$:
Line #:	Worktag:	Category:	Amount \$:

Approver Name: _____ Signature: _____ Date: _____