

UNIVERSITY OF HAWAII

CAMPUS:

PURCHASE ORDER CHANGE

| | | |
|------------|--|------------------------|
| DEPARTMENT | DATE OF CHANGE | RE: PURCHASE ORDER NO. |
| VENDOR | REQUISITION NO. | VENDOR CODE NO. |
| | REQUISITIONER/TEL. NO. | |
| | TYPE OF CHANGE <input type="checkbox"/> TOTAL CANCELLATION <input type="checkbox"/> PARTIAL CANCELLATION <input type="checkbox"/> QUANTITY & AMOUNT <input type="checkbox"/> DESCRIPTION, SPECIFICATION, DELIVERY INSTRUCTION <input type="checkbox"/> ACCOUNT OR OBJECT CODE (DO NOT SEND TO VENDOR) | |

YOU ARE HEREBY REQUESTED TO MAKE THE FOLLOWING CHANGE
IN THE ABOVE DESIGNATED PURCHASE ORDER

| ITEM NO. | QUANTITY | DESCRIPTION | OBJECT CODE | UNIT PRICE | AMOUNT |
|----------|----------|--|-------------|------------|--------|
| | | ORIGINAL ORDER READS: | | | |
| | | CHANGE ORDER TO READ: | | | |
| | | NET CHANGE: \$ _____ <input type="checkbox"/> INCREASE; OR <input type="checkbox"/> DECREASE | | | |

SUMMARY OF ACCOUNT CODE/OBJECT CODE CHANGES

| ACCOUNT CODE | OBJECT | AMOUNT | DEBIT(D) | |
|--------------|--------|--------|-----------|--|
| | | | CREDIT(C) | |
| | | | | |

REASON FOR CHANGE:

PURCHASING OFFICER SIGNATURE

DATE

APPROVING AUTHORITY

TITLE

FISCAL OFFICER

FO CODE NO.

COPY FOR: VENDOR FISCAL OFFICER DISBURSING OFFICE
 OPRPM REQUISITIONER