

PURCHASE ORDER MODIFICATION REQUEST FORM

Please fill out form completely and email to purchasingunlv@unlv.edu

If you need further assistance call the main Purchasing line at 702-895-3521

Requestor:			Date	e	
Department:					
Approving Official:					
(Approving Official si	gnature required i	f Requestor does not ha	ave signature	authority on the account)	
Purchase Order Number		Supplier Name			
ACTION REQUIRED:	(Please Choose C	One)			
Close PO/Un-obligate Funds		Modify Purchase Order			
CHANGE REQUESTI	ED·				
☐ Increase	Decrease	☐ Change Acco	ount Line	☐ Add Account Line	
Line Item No:	Quantity:	Unit of Measure:	Spend Ca	ategory:	
Reason for Change:					
CHANGE REQUESTI					
Increase	Decrease	Change Acco	ount Line	Add Account Line	
Line Item No:	Quantity:	Unit of Measure:	Spend Ca	ategory:	
Dollar Amount of Change: Cost Center/Worktag:					
Reason for Change:					
CHANGE REQUESTE					
Increase	Decrease	Change Acco	ount Line	Add Account Line	
_ine Item No:	Quantity:	Unit of Measure:	Spend Ca	tegory:	
Dollar Amount of Change: Cost Center/Worktag:					
Reason for Change:					

If necessary, please attach another sheet for additional account lines or explanation of changes.