CHANGE ORDER

THIS AREA	Total Original Order\$	
FOR	Total Orig. Ord. Incl. Prev. C/O\$	
PURCHASING	C/O Add\$	
DEPT.	C/O Ded\$	
ONLY		
	Amended Total\$	

Date:_	University of Houston – Downtown Request For Change Order				ORIGINAL P.O. NO.			
го і		DEPARTMENT	G	CHANGE NO.		_		
Department Account No.		DELIV	Room					
Item No.		Description		Quantity	Unit	Unit Price	Total Cost	
	Emergency justifcat	ion:				-		_
	Material is needed for	or:						
	Not later than:							_
		Funds available:Purchasing Department						
Requested by:Ext. No		Approved by:	G	Grants/Contracts				
Approved by:		Approval:	C	Certifying Signature				