ASB Purchase Order Revision

VENDOR INFORMATION		
	Purchase Order #	
	Requisition #	
	Vendor #	
	School/Department:	
	Contact/Phone #	

The following revisions are hereby authorized on the above referenced Purchase Order.

REASON FOR CHANGE - PLEASE CHECK THE APPROPRIATE BOX:

Code change ☐

Monetary Change ☐ Increase ☐ Decrease

Disencumberance ☐

DESCRIPTION	AMOUNT

Current PO Extended Price:	
Additional Shipping:	
Additional Sales Tax:	
Revised PO Balance:	$0.00

PO CODING ADJUSTMENTS

GENERAL FUND		ASB		CAPITAL PROJECTS	
Debit:	$	Debit:	$	Debit:	$
Credit:	$	Credit:	$	Credit:	$
Debit:	$	Debit:	$	Debit:	$
Credit:	$	Credit:	$	Credit:	$

AUTHORIZED BY _____

_____

_____

_____

DATE

PURCHASING APPROVAL _____

DATE _____

Everett Public Schools PO Box 2098 Everett, WA 98213 Purchasing (425)385-4180 fax (425)385-4172