



CHANGE REQUEST

Valera Hall 180
Phone: (818) 677-2301
Fax: (818) 677-6544
Mail Code: 8231
Email: purch@csun.edu

DO NOT use this form to *cancel a Requisition or close a Purchase Order*
Please email your request to cancel a requisition or close a purchase
order to purch@csun.edu. All email requests to cancel or close must
include your Financial Approver's authorization.

***Fields marked with an asterisk (*) are required.**

REQ ID _____ or PO ID _____ VENDOR NAME* _____

DEPT ID* _____ DEPT NAME* _____ REQUESTOR* _____ EXT* _____ EMAIL* _____

CHANGE REQUISITION

CHANGE PURCHASE ORDER

ADD LINE ITEM	CHANGE LINE ITEM	CANCEL LINE ITEM
LINE # _____ QTY _____ UNIT OF MEASURE (UOM) _____ UOM PRICE (EACH/LOT) \$ _____ TOTAL AMOUNT \$ _____		
DESCRIPTION _____		
CHARTFIELD ACCT _____ FUND _____ DEPT ID _____ PROGRAM _____ CLASS _____ PROJECT _____		
FROM CURRENT CHARTFIELD TO ACCT _____ FUND _____ DEPT ID _____ PROGRAM _____ CLASS _____ PROJECT _____		
INCREASE LINE AMOUNT BY \$ _____ -OR- DECREASE LINE AMOUNT BY \$ _____		
(TO INCREASE OR DECREASE A LINE AMOUNT, PLEASE SEE FORM INSTRUCTIONS, SECTION 2)		

ADD LINE ITEM	CHANGE LINE ITEM	CANCEL LINE ITEM
LINE # _____ QTY _____ UNIT OF MEASURE (UOM) _____ UOM PRICE (EACH/LOT) \$ _____ TOTAL AMOUNT \$ _____		
DESCRIPTION _____		
CHARTFIELD ACCT _____ FUND _____ DEPT ID _____ PROGRAM _____ CLASS _____ PROJECT _____		
FROM CURRENT CHARTFIELD TO ACCT _____ FUND _____ DEPT ID _____ PROGRAM _____ CLASS _____ PROJECT _____		
INCREASE LINE AMOUNT BY \$ _____ -OR- DECREASE LINE AMOUNT BY \$ _____		
(TO INCREASE OR DECREASE A LINE AMOUNT, PLEASE SEE FORM INSTRUCTIONS, SECTION 2)		

NOTES/SPECIAL INSTRUCTIONS/REASONS FOR CHANGE: _____

An Authorized Signature Form must be on file in order to process this request.

FINANCIAL APPROVER*: _____ PRINT NAME*: _____ DATE*: _____

PURCHASING & CONTRACT ADMINISTRATION USE ONLY

APPROVED: The requested change will be processed.
NOT APPROVED: The requested change cannot be processed for the following reason(s): _____

PROCESSED BY: _____ DATE: _____

APPROVED BY: _____ DATE: _____

CHANGE REQUEST FORM INSTRUCTIONS

This form is to request a change to a requisition or a purchase order. Incomplete forms may delay processing of the change requested.

Note: DO NOT use this form to cancel a requisition or to close a purchase order. Please email your request to cancel a requisition or to close a purchase order to purch@csun.edu. All email requests must include your Financial Approver's authorization and "CANCEL/CLOSE" in the subject line.

SECTION 1

All fields marked with an asterisk are required.

A REQ ID or a PO ID (Number) must be provided.

SECTION 2

CHANGE REQUISITION or CHANGE PURCHASE ORDER

Indicate if the form is changing a requisition or changing a purchase order by checking one (1) box.

ADD LINE ITEM

Please check the box.

The following information must be completed:

- **Line Number.** Next sequential line number in the requisition or purchase order.
- **Quantity.** Number of units being purchased.
- **Unit of Measure (UOM)** (i.e., each, lot)
- **UOM Price (Each Unit/Lot).** The unit price of the item being purchased.
- **Total Amount.** The quantity multiplied by the UOM Price.
- **Description.** A description of the item being purchased.
- **Chartfield.** The chartfield string that the item will be paid against.

CHANGE LINE ITEM

Please check the box.

Complete **only** the fields for a specific line item on the requisition or purchase order **that need to be changed**. The following additional information is provided herein for further clarification:

- TOTAL AMOUNT (\$)
 - When the quantity is being changed on a line, a new total amount must be entered. **Note: If an invoice has been paid against a line, a change cannot be made.** The line must be closed and a new line must be entered. Please do not complete the INCREASE OR DECREASE LINE AMOUNT BY fields.
- FROM CURRENT CHARTFIELD TO (:)
 - When the existing chartfield string on the requisition or purchase order is being changed, only enter the new chartfield string for that line that the item will be paid against.
- INCREASE OR DECREASE LINE AMOUNT BY
 - When increasing or decreasing the line item total amount, only enter the **(incremental)** amount by which you wish to increase or decrease the line. To determine the incremental increase/decrease amount, subtract the "new" total from the "original" line item amount total on the PO. Please do not use the remaining encumbrance line item balance for the "original" line item amount total on the PO. The resulting incremental amount shall be entered in only **ONE** of the two (2) fields (**increase by** or **decrease by**).

CANCEL LINE ITEM

Please check the box.

Indicate which line item on the requisition or purchase order needs to be cancelled. No other fields in this section need to be completed.

SECTION 3

Please indicate in this area any special notes or instructions related to the change request that may need an explanation or special attention.

SECTION 4

This form must be signed by the Financial Approver. A current Authorized Signature Form must be on file in order to process the change request.

DELIVERY INFORMATION:

This form shall be sent to the campus Purchasing Department for approval and processing. An email will be sent upon receipt of request via email.

Preferred Delivery Method - Electronic Delivery: Please send this form to purch@csun.edu.

Campus Mail or Personal Delivery: Purchasing & Contract Administration, Valera Hall, Room 180, Mail Code: 8230