Clear Form

# THE UNIVERSITY CORPORATION, SAN FRANCISCO STATE

## PO CHANGE/FINALIZATION REQUEST FORM

Date: _____

To Buyer: _____

From: _____

Ext _____

| | |
|---|---|
| PI Authorized Signature | Date |
| Printed Name | Ext |

| | |
|---|---|
| UCorp Authorized Signature | Date |
| Printed Name | Ext |

### Part I – Finalization of PO

PO Number(s): _____

(Purchase Order will be liquidated in it's entirely. No further transaction will be allowed.)

### Part II – Change Order Request

| PO Number | Schedule / Line No. | Current Distribution Chartfield | New Distribution Chartfield Changes (If any) | Current Schedule Amount | Increase Amount | Decrease Amount | New Schedule Amount |
|---|---|---|---|---|---|---|---|
| | | Account _ _ _ _ _ _<br>Fund _ _ _ _ _<br>Dept ID _ _ _ _<br>Project _ _ _ _ _ _ _ _ | Account _ _ _ _ _ _<br>Fund _ _ _ _ _<br>Dept ID _ _ _ _<br>Project _ _ _ _ _ _ _ _ | | | | |
| | | Account _ _ _ _ _ _<br>Fund _ _ _ _ _<br>Dept ID _ _ _ _<br>Project _ _ _ _ _ _ _ _ | Account _ _ _ _ _ _<br>Fund _ _ _ _ _<br>Dept ID _ _ _ _<br>Project _ _ _ _ _ _ _ _ | | | | |
| | | Account _ _ _ _ _ _<br>Fund _ _ _ _ _<br>Dept ID _ _ _ _<br>Project _ _ _ _ _ _ _ _ | Account _ _ _ _ _ _<br>Fund _ _ _ _ _<br>Dept ID _ _ _ _<br>Project _ _ _ _ _ _ _ _ | | | | |

Comments:_____

REV 07/11