



BUFFALO STATE
The State University of New York

Sponsored Program Operations
1300 Elmwood Avenue
Buffalo, NY 14222



Open Purchase Order Change Form

(Not to be used for the transfer of paid costs)

Vendor Name: _____ Date: _____

Vendor Address: _____

Explanation:

Change in Vendor Address

Cancel – Vendor unable to supply goods/Change in Vendor

Clerical error in encumbrance

Other (explain): _____

EXISTING PO INFORMATION:

Project: _____ Task: _____ Award: _____

Expenditure Type: _____

Organization: _____

P.O. #: _____

P.O. Date: _____

NEW PO INFORMATION (ONLY COMPLETE FOR THE ITEMS CHANGING):

New Project: _____ Task: _____ Award: _____

New Vendor Address: _____

New Expenditure Type: _____ Amount of Change _____ New Amount: _____

Additional Notes: _____

Authorized Signature: _____

Grants Approval: _____