PURCHASE ORDER - CHANGE FORM

WPAUMC
Western Pennsylvania Annual Conference
The United Methodist Church

1204 FREEDOM ROAD
CRANBERRY TOWNSHIP, PA 16066
PHONE: 724-776-2300 FAX: 724-776-1355

Original Purchase order no: _____

Requested by: _____ Date: _____

Ministry Team: _____ Budget Line: _____

Purpose or Use: _____

Vendor Name: . _____

Vendor Address: _____

Vendor Address 2: _____

City: _____

Vendor Contact: _____

Date Needed: _____

Delivery or Service address:

Delivery address: _____

Delivery address 2: _____

City _____ state: _____ zip: _____

State: _____ Zip: _____

Phone: _____ Fax: _____

E-Mail: _____

Ship Via: _____

PRODUCT/SERVICE DESCRIPTION	ITEM NO.	QTY	UNIT PRICE	EXTENDED COST
TOTAL				

REQUESTOR'S SIGNATURE: _____ Date: _____

For Accounting Department Use Only

APPROVAL SIGNATURES:

Supervisor or Team Leader: _____ Date: _____

Treasurer: _____ Date: _____

Vendor EIN or SS on file? YES: _____ Date: _____
NO: _____