

**DESERT SANDS UNIFIED SCHOOL DISTRICT
REQUEST TO INCREASE
PURCHASE ORDER OR CONTRACT**

Vendor Name: _____

Purchase Order/Contract Number: _____

Original Purchase Order/Contract Amount: \$ _____

Purchase Order/Contract needs to be increased in the amount of: \$ _____
(Any **Contract** increase/change requires board approval, please provide board documentation)

THIS UNEXPECTED INCREASE IS NEEDED FOR THE FOLLOWING REASON(S):

Printed Name Date
Principal/Department Head

Signature Date
Principal/Department Head

Director of Fiscal Services Approva

Date

FOR PURCHASING DEPARTMENTS USE ONLY:

____ Approved Scheduled for Board Approval on: _____

____ Denied REASON: _____

Director of Purchasing

Date