

Chabot College	District Office	Las Positas College

Attn: District Purchasing Department

Request To Adjust Open Purchase Order PO #:								
Comment:								
Account Number:								
	Fund	Org	Account	Program				
Account Number: _	Fund	Org	Account	Program				
Increase by: _\$		or	Decrease by: \$					
Account Number:								
Account Number:	Fund	Org	Account	Program				
	Fund	Org	Account	Program				
Increase by: \$		or	Decrease by: \$					
		PO REVISED TOTAL: \$						
Vendor #:								
Vendor Name: _								
Requested by:			Date:					
Approved by: _			_ Date: _					
CLPCCD Bus Svcs:								