

## **Purchase Order Maintenance Form**

MISSISSIPPI VALLEY STATE UNIVERSIT	ΓY				
Requestor's Name:		Department Name:			
	Purchase Order fur	nds Restoration to budget:		Section 1	
Reason for Request:	P.O. Amount	Amount Expended	Amount Remaining	Date Requested	
	Signature requ	uired for section 1	<u> </u>		
Requestor's Signature	Date		Approved	Disapproved	
Area VP Signature	Date	Additional Requirement	nt Approved	Disapproved	
VP Business and Finance	Date	Additional Requirement	nt Approved	Disapproved	
Onetime	Process Only, C	Closeout of Purchase (	Order Funds	Section 2	
	• /	uest Changes			
Please indicate requested change(s):  Change control restriction as follows:	BANNER ORG'S. #	: 2 <sup>ND</sup>	: 3 <sup>RD</sup>		
Change control restriction as follows.		Amount	<u>Increase</u> <u>Decre</u>	ase	
Increase/Decrease: Purchase Order Amount		to	_		
Increase/Decrease: State Funds Amount		to	_		
Increase/Decrease: Federal Funds Amount		to	_		
Grand Total of Increase/Decrease		to			
Decrease Remaining Balance Only					
Brief Reaso	n:				
Requestor's Signature:		Area Vice President:			
	Type of Cha	nnges Needed		a	
Change Departmental address to:				Section 3	
Change E-Mail address to:					
Change Reporting Unit from	t	0	•		
Signature:					
		Office Only			
XStaff Accountant Date	XBudget Accountant	Date	V P of Business and Finance and the		
Vice President for Business and Finance Date	President Office	Date	signature re	University President signature required only if there is an increase in	
Title III  Refer to Approval Schedule		Date Refer to Approval Schedule	spending **		

White: Purchasing Canary: Accountant Pink: Department Completed 10/19/21