Request for Special Procedures for Purchase Orders

NOTE: Complete all * fields and any other that apply to the action you are requesting.	
* Date	
* Requestors Initials	
* Agents Name	
* Purchase Order Number	
* Purchase Order Date	
UDDS	
Vendor Name	
Contact	
Phone #	
Fax #	
Order Type Regular Blanket Contract Cancellation Cash With Confirming Change ASSO-type Requested Action	
Send/Fax to Vendor	
Pull Copy(ies) and give to	
	A 11
Vendor Voucher Audit Department AA Status	, All
Send/Fax to Department	
Call for pick-up of Purchase Order.	
Other	