



RI-FANS CHANGE ORDER FORM

EMAIL CHANGE ORDERS TO: doa.purchangeorders@purchasing.ri.gov

Please refer to your Purchase Order or RIFANS for the information requested

This form is used for:	<ul style="list-style-type: none"> • Supplier Name Changes • Cancellations to Blanket/Contract Purchase Agreements and Standard Purchase Orders. • Line item changes, date changes and agreed amount changes to Blanket/Contract Purchase Agreements.
This form is NOT applicable for:	<ul style="list-style-type: none"> • Adding a line item or increasing a quantity on a Standard Purchase Order over \$5000.00. (A change order requisition should be created and submitted for this type of change). • Releases (Blanket/Contract) Should be processed as an electronic change order through RIFANS.

RED boxes indicate **REQUIRED** field

(ONLY 1 PURCHASE ORDER PER CHANGE ORDER FORM)

	TYPE IN HERE		TYPE IN HERE
DATE		MPA NUMBER	
PURCHASE ORDER NUMBER		SOLICITATION NUMBER	
BUYER NAME <small>(as it appears on the purchase order)</small>		TYPE OF REQUISITION	
PURCHASE ORDER END DATE		DELEGATED NUMBER	
AGENCY DOC I.D. NUMBER		GRANT NUMBER	
VENDOR NAME			

TYPE OF CHANGE ORDER	FROM	TO
SUPPLIER NAME CHANGE <small>(include W-9 FORM and letters from companies advising of the name change)</small>		
AGREED AMOUNT CHANGE <small>(BLANKET/CONTRACT)</small>	CURRENT AMOUNT	REVISED AMOUNT
DATE CHANGE (BLANKET/CONTRACT)	TO	TO
OPTIONS FOR RENEWAL (If applicable)	What number option year is being exercised? (if applicable)	How many option years remain? (if applicable)
CANCEL ENTIRE PURCHASE ORDER <small>(Give justification/reason below)</small>	YES	

LINE-ITEM CHANGE FOR BLANKET PURCHASE AGREEMENTS:

CODES: (A) Add Line (D) Delete Line (DC) Description Change (PC) Price Change

CODE	LINE #	DESCRIPTION	PRICE FROM	PRICE TO

REASON/JUSTIFICATION & SIGNATURES ARE REQUIRED ON THE NEXT

DOCUMENTS: ARE ALL APPLICABLE/NECESSARY SUPPORTING DOCUMENTS ATTACHED TO THIS REQUEST?
YES: N/A:

REASON/JUSTIFICATION:

PURCHASE ORDER NUMBER: _____ CONTACT PERSON: _____

CONTACT EMAIL: _____ CONTACT PHONE: _____

AUTHORIZED AGENT: _____

DO NOT LOCK THIS FORM

This form, change order instructions and Trainings/RIFANS Instruction Manual can be found on the purchasing website:
<https://ridop.ri.gov> in the Procurement Library. [Agency Procurement Library | Rhode Island Division of Purchases \(ri.gov\)](#)

FOR DOA PURCHASES ONLY SECTION

PROCUREMENT SPECIALIST SIGNATURE: _____ DATE: _____

ADMINISTRATOR OF PURCHASING SYSTEMS SIGNATURE: _____ DATE: _____

DEPUTY/PURCHASING AGENT SIGNATURE: _____ DATE: _____

DOA PURCHASES COMMENTS: