



PURCHASE ORDER OPTION LINE GUIDANCE FORM

Purchase Order (4XXXXXXXXXX): _____ Date: _____

Supplier: _____ FY: _____

Action Requested By: _____ Phone: _____ Email: _____

EXERCISE LINE OPTION:

PO Recipient Name: _____

Date to exercise option: _____

Period of Performance: Start Date:** _____ Ending Date: _____

**When an option is exercised, the option is not active until the period of performance start date

VERIFICATION OF OPTION LINE ACCOUNT ASSIGNMENT

Line Item #	Cost Object Type	Cost Object #	GL Account #	Business Area #	Grant #	Amount

ADDITIONAL COMMENTS

APPROVALS (required for all actions)

The requested action support our objectives and is appropriate within University policies.

Sufficient funds will exist for changes requiring additional funds. Changes comply with University fiscal policy.

Budget Administrator/Budget Executive Name

Financial Officer Name

Signature of Budget Administrator/Budget Executive

Date

Signature of Financial Officer

Date

SUBMISSION INSTRUCTIONS

SUBMITTING A PURCHASE ORDER OPTION LINE GUIDANCE FORM: Return via email to Purchasing Agent/Assistant assigned to the product category. To find the Purchasing Agent/Assistant assigned to a specific product category, see the Product Category Codes. Please include "Option Line Form" and reference PO number in the subject line of the email (e.g, 4100000123).