

Exhibit E

PURCHASE ORDER CHANGE ORDER REQUEST FORM

Attach a copy of the purchase order and any supporting documentation.



Purchase order number _____
 Vendor (include vendor's number from ADG) _____

Current purchase order amount (including any
 previously approved change orders) _____
 Requested change order amount _____
 New purchase order total _____

PLEASE CHANGE THE FOLLOWING ITEMS (FILL IN ALL THAT APPLY)						
Item Number	From Quantity	To Quantity	From Unit Price	To Unit Price	From Account Code	To Account Code

PLEASE ADD THE FOLLOWING ITEMS					
Item	Account	Description	Quantity	Unit Price	Amount

Reason/Justification/Special Instructions: _____

Signature/Approvals

 Division Head Department Director Purchasing Agent County Administrator - if applicable

 Date Date Date Date

SUMTER BOARD OF COMMISSIONERS

7375 POWELL RD STE 200
WILDWOOD FL 34785

PURCHASE ORDER: 9122662

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***** VENDOR *****

**GALLS, LLC
PO BOX 71628
CHICAGO IL 60694-1628**

***** DELIVER TO *****

**SUMTER CO PURCHASING
319 E ANDERSON AVE
BUSHNELL FL 33513**

Ordered	Due By	Ship Via	FOB	Terms	Customer No	By
11/02/22	12/02/22			NET		MALDERMAN

Requisition No	Vendor No	Vendor Phone	Vendor Fax	Vendor Contact
00023831	2311-1	(866)286-1358		

No	Quantity	U/M	Description	Unit Price	Extended	G/L Account
1	1.00	EACH	Firefighter Daily Uniforms	24,000.0000	24,000.00	001-413-522-5200
				** TOTAL **	24,000.00	

VENDOR INSTRUCTIONS:

- MAIL INVOICES TO:
SUMTER CO BOARD OF COMMISSIONERS
7375 POWELL RD SUITE 206
WILDWOOD, FL 34785-4203
OR EMAIL INVOICES TO:
ADMINISTRATIVE.SERVICES@SUMTERCOUNTYFL.GOV
- INVOICES AND PACKAGES MUST BEAR THE P.O. NO. ABOVE.
- PURCHASES MAY NOT EXCEED THE TOTAL AMOUNT OF THIS ORDER WITHOUT PRIOR APPROVAL BY THE PURCHASING DEPT.
- ACCEPTANCE OF THIS ORDER INCLUDES ACCEPTANCE OF ALL TERMS, PRICES, DELIVERY INSTRUCTIONS, SPECIFICATIONS AND CONDITIONS.
- STATE TAX EXEMPT#: 85-8012622366C-3
- IF YOU HAVE QUESTIONS, PLEASE CALL (352)689-4400.

SPECIAL INSTRUCTIONS:

AUTHORIZED BY