



**SIMPLIFIED PURCHASE AGREEMENT (SPA)**  
**MODIFICATION JUSTIFICATION**

**FROM:** Agency Name:  
Authorizing Specialist:  
Phone Number:  
Email Address:

**SUBJECT:** Justification for Cost Adjustment to  
SPA Work Order Number  
BAC Requisition Number  
Jacket Number Purchase Order Number

**To:**

Original Cost:  
Modification Charge:  
\*Total Revised Cost:

Reason for Adjustment:

New Delivery Date if Warranted:

**This cost adjustment was negotiated and approved by our agency (sign and date below).**

Authorizing signature	Date
Contractor signature	Date

**Send this signed form with the original signed SPA Work Order form to the vendor,  
and to the SPA team at**

\*For ordering customer, the GPO surcharge will be in addition to this total.