Amendment	#
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Purchase Order #

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(Assigned by Business Unit)

Change Order #

Tracking #

(Assigned by Purchasing)

UNIVERSITY SYSTEM OF NEW HAMPSHIRE

AMENDMENT TO

INDEPENDENT CONTRACTOR AGREEMENT (This agreement is not in effect until signed by all parties.)

CONTRACTOR INFORMATION

Name:				
Address:		City	State Zip code	
Phone:	Fax:	Email:		

Whereas the University and the Contractor desire to amend their agreement originally executed on:

Purchase Order Number:	Dated:	

The University and the Contractor hereby agree to amend said agreement as follows (check all that apply):

Contract Amount / Adjust by	Revise	ed Contract Amount	
Purchase Order Amount / Adjust by	Revise	ed PO Amount	
Revised Dates of Services:		Other	

Describe change to original ICA below:

AUTHORIZED SIGNATURES

Hiring Administrator	Typed or Printed Name	Date	
Independent Contractor	Typed or Printed Name	Date	
Purchasing	Typed or Printed Name	Date	
 Additional Signature when required: VP Finance and Administration by campus when fees exceed \$75,000 USNH Vice Chancellor signature required when fees exceed \$500,000 			
VP Finance and Administration	Typed or Printed Name	Date	
Vice Chancellor	Typed or Printed Name	Date	