PURCHASE ORDER

DATE:

The following number must appear on all related correspondence, shipping papers, and invoices:
P.O. NUMBER:

To:

Ship to (if different address):

P.O. DATE	REQUISITIONER	SHIP BY	SHIP VIA	F.O.B. POINT	TERMS

QTY	UNIT	DESCRIPTION	UNIT PRICE	TOTAL
			SHIPPING	
			TAX	
			OTHER	
			TOTAL	

1. Please send 2 copies of your invoice
2. Enter this order in accordance with the prices, terms, and delivery method, and specifications listed above.
3. Notify us immediately if you are unable to ship as specified.
4. Send all correspondence to:
5. Contact Name_____ Phone Number_____

Authorized by Date