

Purchase Order

Company: _____ Address: _____ City, State, ZIP: _____	Vendor ID: _____ PO Number: _____ PO Date: _____
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PURCHASE FROM: Vendor: _____ Address: _____ City, State, ZIP: _____	SHIP TO: Company: _____ Address: _____ City, State, ZIP: _____
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Item	Price / unit	Quantity	Total (\$)

Contact: _____
 Payment Terms: _____
 Shipping: _____