

Purchase Order

PO # : _____

PO Date : _____

To :	[Company Name] [Company Address] [City, ST, ZIP Code] Attn : _____ Phone : _____ Fax : _____ Email : _____	Ship To :	[Company Name] [Company Address] [City, ST, ZIP Code] Attn : _____ Phone : _____ Fax : _____ Email : _____
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FOB	Shipped Via	Payment Term

Item No	Description	Qty	Unit Price	Total
Remarks :			Subtotal	
			Tax (%)	
			Freight	
			Total	