

Purchase Order

Supplier

Supplier Name
Address Line 1
Address Line 2
City, ZIP
Country

Ship To

Recipient Name
Address Line 1
Address Line 2
City, ZIP
Country

Order Info

PO Number: PO-001
Date: 2024-06-16
Terms: Net 30

#	Description	Qty	Unit Price	Total
1	Product Name 1	10	50.00	500.00
2	Product Name 2	5	100.00	500.00
Subtotal				1,000.00
Tax (10%)				100.00
Total				1,100.00

Remarks:
Goods must be delivered within 2 weeks of order date.

Authorized Signature: _____
Date: _____