

Retail Store Bulk Purchase Order

Order No: _____ Date: _____

Store Information

Store Name

Contact Person

Phone

Store Address

Email

Supplier Information

Supplier Name

Contact

Email

Supplier Address

Order Details

#	Product Name / Description	SKU	Qty	Unit	Unit Price	Total
1	<input type="text" value="Product"/>	<input type="text" value="SKU"/>	<input type="text"/>	<input type="text" value="Unit"/>	<input type="text"/>	<input type="text"/>
2	<input type="text" value="Product"/>	<input type="text" value="SKU"/>	<input type="text"/>	<input type="text" value="Unit"/>	<input type="text"/>	<input type="text"/>
3	<input type="text" value="Product"/>	<input type="text" value="SKU"/>	<input type="text"/>	<input type="text" value="Unit"/>	<input type="text"/>	<input type="text"/>

Subtotal _____

Discount _____

Tax _____

Grand Total _____

Remarks / Special Instructions

Requested By

Name & Signature

Approved By

Name & Signature