

# Footwear Retail Purchase Order Sheet

PO Number

Date

Vendor Name

Vendor Contact

Retailer Name

Store Address

Phone

Email

#	Style/Model	Description	Color	Size	Qty	Unit Price	Total
1							
2							
3							
Subtotal							
Tax							
Total							

Notes / Special Instructions

Delivery Date

Payment Terms

Vendor Signature \_\_\_\_\_

Date \_\_\_\_\_

Retailer Signature \_\_\_\_\_

Date \_\_\_\_\_