

Purchase Order

Vendor

Company Name:

Street Address

City, State, ZIP

Phone:

Email:

Ship To

Company Name:

Street Address

City, State, ZIP

Phone:

Attention:

Order Details

PO Number:

Date:

Requested By:

Terms:

Ship Via:

Line Items

#	Item Code	Description	Quantity	Unit	Unit Price	Discount	Tax (%)	Line Total

Subtotal:

Discount:

Tax:

Shipping:

Total:

Special Instructions / Comments

Prepared By

Approved By

