

Standard Purchase Order

PO Number:

Date:

Supplier Name:

Supplier Address:

Buyer Name:

Company Name:

Bill To:

Ship To:

Order Details

#	Description of Goods / Services	Quantity	Unit	Unit Price	Total
1	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____
Subtotal					_____
Tax					_____
Grand Total					_____

Terms & Conditions

Delivery Date:

Payment Terms:

Incoterms:

Contact Person:

Contact Email:

Contact Phone:

Authorized Signature (Buyer)

Authorized Signature (Supplier)