

# Purchase Order

This number must appear on all related  
correspondance, shipping papers and invoices

<b>P.O. #</b>	
Date	
Attention	

	<b>ORDERED FROM:</b>		<b>SHIP TO:</b>
Name:		Name:	
Address:		Address:	
Phone/Fax:		Phone/Fax:	

Please notify us immediately if you are unable to ship complete order by date specified

Please Deliver By	Account Number	Purchasing Agent	Ship Via	F.O.B. Point	Terms Requested

  

Quantity	Item #	Please Supply Items Listed Below	Unit Price	Total

<input checked="" type="checkbox"/>	<b>Method of Payment:</b>		
	Charge Card		Subtotal
	Money Order	Credit Card #: _____	SalesTax
	COD	Expiration Date: _____	
	Cash	Name on Card: _____	Shipping
	Acct. FWD	Check Paid to: _____	
	Check		<b>TOTAL \$</b>

Please supply the above mentioned goods subject to the conditions specified.

Acknowledge receipt of this order specifying prices and a definite shipping date.  
 Enter this order in accordance with the prices, terms, delivery method, and specifications listed above.  
 Make no substitutions or changes without authority from us.  
 Please send \_\_\_\_ copies of your invoice.  
 Deliver no goods without a copy of this purchase order.  
 We reserve the right to cancel this order if shipment is not made as promised  
 Send all correspondence to:

**Date:** \_\_\_\_\_ **Authorized By:** \_\_\_\_\_