[Company Name]

PURCHASE ORDER

[Street Address]
[City, ST ZIP]
Phone: (000) 000-0000
Fax: (000) 000-0000
Website:

DATE	9/17/2015
PO #	[123456]

VENDOR	SHIPTO
[Company Name]	[Name]
[Contact or Department]	[Company Name]
[Street Address]	[Street Address]
[City, ST ZIP]	[City, ST ZIP]
Phone: (000) 000-0000	[Phone]
Fax: (000) 000-0000	

REQUISITIONER	SHIP VIA	F.O.B.	SHIPPING TERMS

ITEM #	DESCRIPTION	QTY	UNIT PRICE	TOTAL
[23423423]	Product XYZ	15	150.00	2,250.00
[45645645]	Product ABC	1	75.00	75.00
				-
				-
				-
				-
				-
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				-
				-
				-
				-
				-
				-
				-
				-

	SUBTOTAL	2,325.00
	TAX	-
	SHIPPING	-
	OTHER	-
	TOTAL	$ 2,325.00

Comments or Special Instructions

If you have any questions about this purchase order, please contact
[Name, Phone #, E-mail]