

,  
,  
Phone:

# PURCHASE ORDER

P.O. #  
ORDER DATE:

VENDOR ,

SHIP TO ,

SHIPPING SERVICE		SHIPPING METHOD		DELIVERY DATE	
QUANTITY	ITEM #	DESCRIPTION		UNIT PRICE	LINE TOTAL
					\$0.00

Subtotal	
Sales Tax	
Shipping Charge	
<b>Order Total</b>	\$0.00

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

\_\_\_\_\_  
Customer Signature