

# Purchase Order

**Supplier:**

**Date Ordered:** *current date*

**P.O. #:** 0000

**Date Required:** *date*

**User Name:** *username*

<b>Bill To:</b>  Oxford College  670 Progress Avenue,  Scarborough, Ontario, Canada  M1H 2W6	<b>Ship To:</b>  Oxford College  670 Progress Avenue,  Scarborough, Ontario, Canada  M1H 2W6	<b>Terms:</b> Credit Card  <b>Phone:</b> <i>phone number</i>  <b>Fax:</b> <i>phone number</i>  <b>Email:</b> <i>email address</i>  <b>Contact:</b> Customer Service
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Item Number	Description	Quantity	Unit Price	Item Total
SM3EL	Lvl 3 Masks 50/box	3	\$ 0	\$ 0
	Yellow (L)	3	\$ 0	\$ 0

**Order Total: \$0**