

NO:

LOCAL PURCHASE ORDER

DATE:2021-12-19

M/s:.....

Please arrange to supply the following items:

No	Description	Qty	Unit Price(UGX)	Total Price(UGX)
Overroll Total				
Prepared By	Authorized By	Received By:	Approved By:	
PRO & IC	W/SHOP PLANNER/ADM	GM:	MD:	
SIGN:.....	SIGN:.....	SIGN:.....	SIGN:.....	
DATE:.....	DATE:.....	DATE:.....	DATE:.....	