



# Purchase Order

[Your Company Slogan]

Date: February 7, 2011

PO # 9286

Vendor

[Name]

Ship To

[Name]

[Company Name]

[Company Name]

[Street Address]

[Street Address]

[City, ST ZIP Code]

[City, ST ZIP Code]

[Phone]

[Phone]

Customer ID [ABC12345]

Customer ID [ABC12345]

Shipping Method	Shipping Terms	Delivery Date

[illegible]

1. Please send two copies of your invoice.
2. Enter this order in accordance with the prices, terms, delivery method, and specifications listed above.
3. Please notify us immediately if you are unable to ship as specified.
4. Send all correspondence to:

[Name]

[Street Address]

[City, ST ZIP Code]

[Phone]

[Fax]

Authorized by

Date \_\_\_\_\_

[Your Company Name] [Street Address], [City, ST ZIP Code] [Phone] [Fax] [e-mail]