



This order number must appear on all packing slips, shipping documents, packages, and invoices.

Page of

PO #:

Purchase Order Date:

Invoice To:

Ship To:

Phone:

Fax:

Supplier:

Federal ID #

Tax Exempt Certificate:

Phone:

Fax:

Remove Line	Description / Part Number	Delivery / Rev #	UOM	Quantity	Price	Taxable	Cost
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	YES NO <input type="radio"/> <input type="radio"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	YES NO <input type="radio"/> <input type="radio"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	YES NO <input type="radio"/> <input type="radio"/>	<input type="text"/>
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	YES NO <input type="radio"/> <input type="radio"/>	<input type="text"/>
<input type="text"/>						Total	<input type="text"/>
<div>(1) Invoice each P.O. separately in duplicate showing above P.O. number and shipping information. (2) All duty and/or taxes must be shown separately on invoice where applicable. (3) For Customs clearance, attach a copy of your invoice to outside of package. (4) This order is subject to the terms and conditions stated.</div>						Authorized Signature	<input type="text"/>
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