Your Company Name

Accounts Payable 100 Main Street Anytown, USA 99999 (123) 456-6789

Required by Date

PURCHASE ORDER
NO:

FOB

Budget Code

VENDOD #	,	
VENDOR #	_	SHIP TO
Phone:		
Fax:		
Phone: Fax: Attn:		
	•	

Terms

Requisition No.

			-									
Item No. Quantity		y Description							Un	it Price	Extended Price	

NOTICE TO VENDOR

Date of Order

- 1. PLEASE MAIL ALL INVOICES IN DUPLICATE.

- 2. P.O. NUMBER MUST APPEAR ON ALL INVOICES, PACKING SLIPS, ETC.

 3. PLEASE ENCLOSE ITEMIZED PACKING LIST WITH EACH SHIPMENT.

 4. ALL MATERIALS FURNISHED ARE SUBJECT TO INSPECTION AND TEST.
- 5. MATERIALS BACK-ORDERED OR CANCELLED MUST SHOW ON INVOICE.
- 6. EACH ORDER MUST HAVE A SEPARATE INVOICE. 7. ADVISE PROMPTLY IF UNABLE TO SUPPLY GOODS ORDERED.

OTHER INSTRUCTIONS		

APF	ROVED	
-----	-------	--

Purchasing Officer

TOTAL AMOUNT

DATE

This Purchase Order is not valid unless signed by the Purchasing Officer.