

Purchase Order



PO NO	PO Date	Amendment No

VENDOR'S REF :                      Date :

<b>VENDOR :</b> <b>ADDRESS :</b>     <b>CONTACT :</b> <b>PHONE :</b> <b>EMAIL ID :</b> <b>FAX :</b>	<b>Billing Add :</b>     <b>Shipping Add :</b>
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						Currency :	
S.No	Description	Model No.	UOM	Qty	Price / Unit	Net Value	
				Total Qty :	Total Value :		
							Total Net Value :

Amount Chargeable(in Words)

Zero

Remarks:

For null

CIN No. :  
Company's TIN No. :  
Company's PAN No. :  
Company's Service Tax No.:  
Company's IEC No. :  
Vendor's TIN No. :  
Vendor's PAN No. :  
Vendor's Service Tax No. :

Approved By                      Authorised Signatory

Terms and Conditions :

E. & O.E