

TEL (631) 845-7033
FAX (631) 293-6978

Show this Purchase Order Number
on all correspondence, invoices,
shipping papers and packages.

DATE	REQUISITION NO.
SHIP TO	

[illegible]

1. Please send _____ copies of your invoice.
2. Order is to be entered in accordance with prices, delivery and specifications shown above.
3. Notify us immediately if you are unable to ship as specified.

AUTHORIZED BY _____