

Purchase Order

Organisation Name

Address Line 1

Address Line 2

City, State ZIP

Phone: (xxx) xxx-xxxx

Email: info@organisation.com

PO Number: _____

PO Date: _____ / _____ / _____

Reference: _____

Vendor Information

Vendor Name: _____

Contact: _____

Address: _____

Phone: _____

Email: _____

Delivery Details

Delivery Address: _____

Contact Person: _____

Delivery Date: _____ / _____ / _____

Order Items

#	Description	Qty	Unit	Unit Price	Total
1					
2					
3					
Subtotal					
Tax					
Total					

Terms & Conditions

- All goods/services must be delivered by the specified date.
- Invoices must quote the Purchase Order Number.
- Payment terms: _____.
- Any deviations from the order must be communicated in writing.

Authorised By

Vendor Confirmation