

Purchase Order

Purchase Order No.

PO-_____

Date

YYYY-MM-DD_____

Supplier Information

Supplier Name

Supplier Name_____

Contact Person

Contact Name_____

Phone

Phone Number_____

Supplier Address

Supplier Address_____

Office Information

Office/Department

Department Name_____

Requested By

Requestor Name_____

Phone

Phone Number_____

Delivery Address

Delivery Address_____

Order Details

NO.	ITEM DESCRIPTION	QTY	UNIT	UNIT PRICE	SUBTOTAL
1					
2					
3					
				TOTAL	

Terms & Conditions

E.g. Payment, delivery terms, etc._____

Authorized By

Name_____

Signature

Date

YYYY-MM-DD

This purchase order is subject to the terms and conditions outlined above.