

[Street Address]  
[City, ST ZIP]  
Phone: (000) 000-0000  
Fax: (000) 000-0000  
Website:

DATE	20/05/2021
PO #	[123456]

[Company Name]  
[Contact or Department]  
[Street Address]  
[City, ST ZIP]  
Phone: (000) 000-0000  
Fax: (000) 000-0000

[Name]
[Company Name]
[Street Address]
[City, ST ZIP]
[Phone]

REQUISITIONER	SHIP VIA	F.O.B.	SHIPPING TERMS

[illegible]

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**Comments or Special Instructions**

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SUBTOTAL	-
TAX	-
SHIPPING	-
OTHER	-
<b>TOTAL</b>	<b>\$ -</b>

If you have any questions about this purchase order, please contact  
[Name, Phone #, E-mail]