**PURCHASE ORDER**

|  |  |
| --- | --- |
| **VENDOR** | **SHIP TO** |
| Company name Contact or department "Street address City, State, ZIP Phone:  | Company name "Street addressCity, State, ZIP Phone:  |

|  |  |  |
| --- | --- | --- |
| **SHIPPING TERMS** | **SHIPPING METHOD** | **DELIVERY DATE** |
| Cost, insurance & freight |  | MM/DD/2021 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **ITEM #** | **DESCRIPTION** | **UNIT COST** | **QTY** | **TOTAL** |
| Item number | Your item | $0.00 | 1 | $0.00 |
| Item number | Your item | $0.00 | 1 | $0.00 |
| Item number | Your item | $0.00 | 1 | $0.00 |
| Item number | Your item | $0.00 | 1 | $0.00 |
| Item number | Your item | $0.00 | 1 | $0.00 |
| Item number | Your item | $0.00 | 1 | $0.00 |
|  | SUBTOTAL | $0.00 |
| (TAX RATE) | 0% |
| TAX | $0.00 |
| SHIPPING | $0.00 |
| **TOTAL** | **0** |