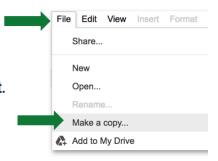


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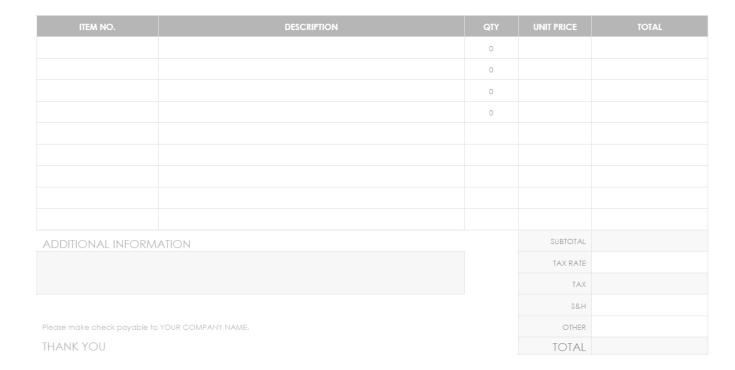
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PURCHASE ORDER FORM

PAYMENT TERMS

ORDER INFORMATION NAME OF COMPANY **ADDRESS PO NUMBER ADDRESS** PO DATE **PHONE VENDOR ID EMAIL SALESPERSON** PURCHASED FROM SHIP TO COMPANY **COMPANY ADDRESS ADDRESS** PHONE/EMAIL PHONE/EMAIL **PERSON OF CONTACT PERSON OF CONTACT** SHIPPING INFORMATION COMPANY LOGO **DELIVERY DATE** SHIPPING METHOD **TERMS** PAYMENT INFORMATION **PAYMENT DUE DATE**

ITEM NO.	DESCRIPTION	QTY	UNIT PRICE	TOTAL
		0		
		0		
		0		
		0		
ADDITIONAL INFORMATION			SUBTOTAL	
			TAX RATE	
			TAX	
			S&H	
Please make check payable to YOUR COMPANY NAME.			OTHER	
THANK YOU			TOTAL	
ORDER APPROVED BY				
SIGNATURE				
DATE				

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