(Your Company Name)	PURCHASE ORE	DER
IYOUR COMPANY SLOGAN)		
IStreet Address)		
ICity, ST ZIP Code)		
Phone ((509) 555-0190) Fax ((509) 555-0191)		
P.O. NUMBER: (100)		
То:	Ship To:	
IName	(Name)	
(Company Name)	(Company Nane	
IStreet Address)	IStreet Address	
(City. ST ZIP Code)	(City.ST ZIP CODE)	

(IPHONE)

(IPhone)

QTY	UNIT	DESCRIPTION		UNIT PRICE	TOTAL
S5UBTOTAL SALES TAX SHIPPING & HANDLING OTHER					TAX ING
				то	TAL

Please send two copies af your invoice.

Enter this order in accordance with the prices, terms, delivery method, and specifications listed above.

Please notify us immediately if you are unable to ship as specified.

Send all correspondence to:

IName)

IStreet Address)

ICity, ST ZIP Code)

Phone ((509) 555-.0190) Fax ((509) 555-0191)

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