PURCHASE ORDER

Your Company Name:

_____

P.O. NO. _____

DATE _____

If using credit card:
Please complete Credit card Form

BILL TO: _____

_____

_____

_____

_____

SHIP TO _____

_____

_____

_____

UPS ◯ FedEx ◯ Truck ◯

UPS/FedEx Shipping #_____

DELIVERY DATE		

QTY	ITEM #	DESCRIPTION/COLOR	JOB	UNIT PRICE	LINE TOTAL
				SUBTOTAL	
				SALES TAX	
				TOTAL	

Authorized by *Date*