

Conf - Purchase Order

Purchase order

	A	B	C	D	E	F	G	H	I
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1

Company Name

2

12345 Street
Name
City Name, State
(ST) ZIP
Phone Number

3

4

5

6

Purchase Order

7

8

Date	Invoice	P.O. number
9/7/16	#123456	12,345,678

9

10

11

Ship date	Ship via	Terms
9/14/16	Shipping company	Shipping & payment terms

12

13

14

Vendor

Ship to

Attention To Name
Their Company name
Street address
City, State, Zip
(123) 456-7890
no_reply@example.com

Your Name
Your Company Name
12345 Street Name
City Name, State (ST) ZIP
Phone Number
youemail@example.com

16

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Item #	Description	Qty	Unit price	Total price
12345-A	Item A	1	\$200.00	\$200.00
12345-B	Item B	2	\$200.00	\$400.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00

25

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32 \$0.00

33 \$0.00

34 \$0.00

35 Subtotal **\$600.00**

36 Shipping & handling **\$20.00**

37 Tax rate **8.60%**

38 Sales tax **\$51.60**

39 **\$671.60**

40