

# Your Business Name

Street Address, City, State Postcode, Country

Tel : (456) 3456-1234, Fax : (456) 3456-1235, Email : yourname@yoursite.com

Website : www.yoursite.com, Tax Registration Number : your tax reg. no

*[Insert logo here]*

*Purchase From*

**Vendor Name**

Street Address

City, State, Postcode

Country

**Attention To : Contact Person**

*Deliver To*

**Deliver To Name**

Ship To Street Address

City, State, Postcode

Country

**Attention To : Contact Person**

## Purchase Order

P. O. No#

**10001**

Date

14/08/2013

Your Ref#

Our Ref#

Credit Terms

Cash

Product ID	Description	Quantity	UM	Unit Price	Amount
2314254	Product A	2	sets	\$1,200.00	\$2,400.00
32543	Product B	3	pcs	\$400.00	\$1,200.00

### Comments

<b>Total</b>	<b>\$3,600.00</b>
<b>Freight</b>	
<b>Amount Paid</b>	
<b>Balance Due</b>	<b>\$3,600.00</b>

### Terms & Conditions

Insert any terms and conditions you have here