

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/Province, Zip/Post code

Country

Attention To : Contact Person

Deliver To

Deliver To Name

Ship To Street Address

City, State/Province, Zip/Post code

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

Sub Total	\$3,600.00
Tax	\$360.00
Invoice Total	\$3,960.00
Freight	
Amount Paid	
Balance Due	\$3,960.00

Terms & Conditions

Insert any terms and conditions you have here