

PURCHASE ORDER

Blanket Purchase Order

PO Number _____

Date issued _____

Validity window _____

Release # _____

FROM (BUYER)

Company name _____

Address _____

Contact / email _____

VENDOR

Vendor name _____

Address _____

Contact / email _____

SHIP TO

Delivery address _____

Attention _____

BILL TO

Billing address / AP contact _____

DESCRIPTION	SKU / REFERENCE	QUANTITY	UNIT PRICE	AMOUNT

Not-to-exceed amount: _____ (releases against this blanket PO must not exceed this figure)

Subtotal _____

Tax (enter amount) _____

Total _____

TERMS

Authorised by (signature)

Date