|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|   |   |   |   |   |   |   |   |   |
|   |  |  |  |  |  |  |  |   |
|   | **Your Company** |  | **Purchase Order** |   |
|   | *Your Address1* |  |  **PO#** |   |
|   | *Your Address2* |  |   |
|   | *City, State, Pin code Country* |  |  |  *Your Phone No. xxxxxxxxxx* |   |
|   |   |   |   |   |   |   |   |   |
|   |  |  |  |  |  |  |   |
|   | *Supplier Name* | **Order Date:** |  |  |   |
|   | *Address1* | **Payment Terms:** |  |  |   |
|   | *Address2* | **F.O.B. Point:** |  |  |   |
|   | *City, State, Pin code Country* | **Freight Terms:** |  |  |   |
|   | *FAX:*  | *xxx-xxx-xxxx* | **Acct Code:** |  |  |   |
|   | *Phone:* | *xxx-xxx-xxxx* | **Sales Tax:** |  |  |   |
|   | Attn: | Contact person of the supplier |  |  |  |   |
|   |   |  |   |  |   |   |   |
|   | **Ship To:** |  |  | **Invoice To:** |  |   |
|   | *Your Company Name* |  | *Your Company Name* |   |
|   | *Your Address 1 {shipping address, godown etc.)* |  | *Your Address 1 {billing address-office/HQ etc.)* |   |
|   | *Your Address2* |  | *Your Address2* |   |
|   | *City, State, Pin code Country* |  | *City, State, Pin code Country* |   |
|   | *Your Phone No. xxxxxxxxxx* |  | *Your Phone No. xxxxxxxxxx* |   |
|   | *Attn:* | *Name* |  | *Attn: Name* |   |
|   |  |  |  |  |  |  |  |   |
|   | **Tax ID:** | **Ship via:** |  | **Required Ship Date:** |  |   |
|   | **Item** | **Quantity** | **Part No.** | **Description** | **UM** | **Unit Price** | **Total** |   |
|   | 1 |   |   |   |   |   |  ₹ -  |   |
|   | 2 |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |
|   | Subtotal |   |   |   |
|   | GST/applicable tax | -----% |   |   |
|   | Freight |   |   |   |
|   | **Total** |  |   |   |
|   |  |  |  |  |  |  |  |   |
|   | **Purchase Order Comments** |  |  |  |  |   |
|   | This purchase order is subject to seller's acceptance of the attached terms and conditions |   |
|   |   |
|   |   |
|   |   |
|   | *Please sign below and return acknowledgement of this purchase order. Please notify us immediately if you are unable to supply.* |   |
|   |  |  |  |  |  |  |  |   |
|   | Name & Title of supplier |  |  |  | Date |   |
|   |  |  |  |  |  |  |  |   |
|   |  |  |  |  |  |  |  |   |
|   |  |  |  |  | **Your Name** |   |   |
|   |  |  |  |   | **Your Designation** |   |
|   |   |   |   |   |   |   |   |   |