

PURCHASE ORDER

PO NO. _____

DATE _____

Attn : _____

Tel : _____

Company Name : _____
Shipping Address : _____

Contact Number : _____ Fax Number : _____
Person In Charge (Order) : _____
Person In Charge (Account) : _____
Email : _____

NO	ITEM CODE / DESCRIPTION	UNIT PRICE	QTY	LINE TOTAL

* CASH ON DELIVERY ONLY

SUB-TOTAL	
(-) DISCOUNT	
GROSS	
(+) DELIVERY CHARGES	
TOTAL	

Confirm order by ,

Name :
NRIC :