



Name of State Agency

PURCHASE ORDER

Purchase Order Summary

Purchase Order Number:
Account Number:
Purchase Order Date: March 7, 2017
Delivery Date: March 12, 2017
Payment Method: Invoice
Payment Terms: Unspecified
Currency: USD
FOB Instruction: Destination
Attachment(s):

Supplier

Name
Company
Street Address
City/State/Zip
Phone:
Fax:
Email:

