

# GOVERNMENT AGENCY

## Sample Purchase Order

PAGE \_\_\_\_\_ OF \_\_\_\_\_ PAGES

**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

1. DATE OF ORDER	2. CONTRACT NO. (If any)	6. SHIP TO:	
3. ORDER NO.	4. REQUISITION/REFERENCE NO.	a. NAME OF CONSIGNEE	
5. ISSUING OFFICE (Address correspondence to)		b. STREET ADDRESS	
		c. CITY	d. STATE e. ZIP CODE
7. TO:		f. SHIP VIA	g. TELEPHONE h. FAX
a. NAME OF CONTRACTOR		8. TYPE OF ORDER	
b. COMPANY NAME		<input type="checkbox"/> a. PURCHASE <input type="checkbox"/> b. DELIVERY REFERENCE YOUR: _____ <small>Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.</small>	
c. STREET ADDRESS			
d. CITY	e. STATE	f. ZIP CODE	
9. ACCOUNTING AND APPROPRIATION DATA		10. REQUISITIONING OFFICE	

11. BUSINESS CLASSIFICATION (Check appropriate box(es))

a. SMALL     
  b. OTHER THAN SMALL     
  c. DISADVANTAGED     
  d. WOMEN-OWNED

12. F.O.B. POINT	14. GOVERNMENT B/L NO.	15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date)	16. DISCOUNT TERMS
13. PLACE OF			
a. INSPECTION	b. ACCEPTANCE		

**17. SCHEDULE (See reverse for Rejections)**

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)

<i>SEE BILLING INSTRUCTIONS ON REVERSE</i>	18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.			17(h) TOT. (Cont. pages)	
	21. MAIL INVOICE TO:						
	a. NAME						17(i) GRAND TOTAL
	b. STREET ADDRESS (or P.O. Box)						
c. CITY					d. STATE	e. ZIP CODE	

22. AUTHORIZED (Signature)	23. CONTACT NAME (Typed)	TEL. #
	TITLE: Contracting/Ordering Officer	FAX #