

# PURCHASE ORDER

P/O NUMBER :  
DATE :  
ACCOUNT No. :  
REFERENCE :

TO:

Please supply the undermentioned goods or services.  
Invoices should be sent to the above address quoting the P/O number.  
A Delivery Note must accompany the goods.

W/H PRODUCT	DESCRIPTION	DATE REQUIRED	QUANTITY	NETT PRICE	VALUE
					<b>TOTAL</b>

DESPATCH INSTRUCTIONS

Signature .....  
For and on behalf of

166899

MARGIN PERF 5X1 1/2" FROM EDGE

TET 064 © A TETRA ORIGINAL FORM

MARGIN PERF 5X1 1/2" FROM EDGE