

LOCAL PURCHASE ORDER

YOUR LOGO

LPO NO.

DATE

QUOTATION REF.

REQUIRED BY

PAYMENT TERMS

DELIVERY ADDRESS

BUYER

Company name

Address

Contact / phone

Tax reg. no. (TRN / VAT / GST)

SUPPLIER

Company name

Address

Contact / phone

Tax reg. no. (TRN / VAT / GST)

#	Description	Qty	Unit	Unit price	Discount	Amount
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

TERMS & CONDITIONS

1. Deliver as per the agreed schedule, to the delivery address above.
2. Quote this LPO number on your delivery note and invoice.
3. All goods are subject to inspection and acceptance on receipt.
4. The invoice must match this LPO in items, quantities and prices.
5. Payment will be made as per the payment terms stated above.

Subtotal

VAT / Tax rate (%)

Tax amount

TOTAL

Prepared by

Approved by

Supplier acceptance

Name, signature & date

Name, signature & date

Name, signature, stamp & date