

**PURCHASE ORDER**

PURCHASE ORDER # \_\_\_\_\_  
 FAX # \_\_\_\_\_  
 BILL TO (COMPANY NAME) \_\_\_\_\_  
 CONTACT NAME & PHONE # \_\_\_\_\_  
 STREET ADDRESS \_\_\_\_\_  
 CITY, STATE, ZIP CODE \_\_\_\_\_

DATE \_\_\_\_\_  
 EMAIL ADDRESS \_\_\_\_\_  
 SHIP TO (COMPANY NAME) \_\_\_\_\_  
 CONTACT NAME & PHONE # \_\_\_\_\_  
 STREET ADDRESS \_\_\_\_\_  
 CITY, STATE, ZIP CODE \_\_\_\_\_

**REQUIRED INFORMATION**

SPECIFIER'S NAME \_\_\_\_\_  
 JOB'S NAME \_\_\_\_\_  
 SPECIAL INSTRUCTIONS \_\_\_\_\_

SPECIFIER'S CITY, STATE \_\_\_\_\_  
 JOB'S CITY, STATE \_\_\_\_\_

ATTACH COMPLETED EXEMPT/RESALE CERTIFICATE OR ADVISE IF TAXES APPLY

TOTAL SQ/FT, SY OR QTY	DESCRIPTION (MUST INCLUDE): SIZE, THICKNESS, PATTERN/COLOR & TILES OR ROLLS	UNIT PRICE	SALES TOTAL

DELIVERY  COMMERCIAL  RESIDENTIAL   
 LOADING DOCK OR FORK LIFT  YES  NO   
 CALL AHEAD  YES  NO   
 IF YES, PLEASE ADVISE \_\_\_\_\_  
 RECEIVING HOURS \_\_\_\_\_

<b>SUBTOTAL:</b>	
<b>TAX(APPLIES TO SHIP TO OR PICK UP STATE):</b>	
<b>FREIGHT QUOTED:</b>	
<b>TOTAL:</b>	

AUTHORIZED BY \_\_\_\_\_ DATE \_\_\_\_\_