

PURCHASE ORDER FORM

(This form can be used if you do NOT have your own system for placing written purchase orders with suppliers)

Purchase Order Reference Number: _____ (use name / date if you have no other preference)

For Invoicing / Accounts Purposes

Company Name: _____

Contact Name: _____

Phone Number: _____

Company Address: _____

Post Code: _____

For Delivery Purposes (write "SAME" here if the details are the same as above: _____)

Company Name: _____

Contact Name: _____

Phone Number: _____

Company Address: _____

Post Code: _____

Items Being Ordered

OPTION 1; Reference quotation number(s): _____		
OPTION 2;		
	Quantity	Description (i.e. machine name, laser power, filter, accessories)
<i>Laser</i>	_____	_____
<i>Filter</i>	_____	_____
<i>Extras</i>	_____	_____
<i>Extras</i>	_____	_____

Please write any notes, differences, additional items or special requirements here:

(Please enter values below in GBP pounds and pence only)

Order Value (NET): £ _____ VAT (20%) £ _____ GRAND TOTAL (inc. VAT) £ _____

Order Raised By Print name: _____

Signature: _____

Date: _____

Please return the completed document to CTR by email / post;
sales@ctrfuture.co.uk | CTR, Unit 5-6 Sterling Business Park, Salthouse Road, Brackmills, Northampton, NN4 7EX