						Purcha	se Order	
Name and Address of Buyer			Name and Address of Supplier			Shipping Detail	Shipping Details	
Contact Person: Email: Contact No.: Place of Supply:			Email: GSTIN:					
			Р	O Details				
PO N	No.:			PO Date:	PO Date:			
Deliv	very Date:			PO Amendr	ment:			
No. o	of Items:			PO Amount	PO Amount:			
#	Description	HSN/SAC Code	Quantity	Unit	Rate	Taxable Amount	Total	
PO Amount				Total (before	Total (before tax):			
				CGST	SGST	IGSTq	Cess	
				Total Tax:	Total Tax: Total (after tax):			
				Total (after t				
				Grand Total	Grand Total:			
					Authorized Signatory			
This Orde		epresentation purpose onl	y. If you would li	ke to create Pur			limited Purchase	