

Vendor Order Confirmation Form

Vendor Information

Vendor Name: _____

Vendor Address: _____

Contact Person: _____

Phone Number: _____ Email: _____

Purchaser Information

Company Name: _____

Purchaser Name: _____

Billing Address: _____

Shipping Address: _____

Order Information

- Order Reference No: _____
- Order Date: _____
- Expected Delivery: _____
- Payment Terms: Prepaid On Delivery Net 30 Other:

Product Details

Product Name	SKU/Code	Quantity	Price per Unit	Total
			\$ _____	\$ _____
			\$ _____	\$ _____
			\$ _____	\$ _____

Subtotal: \$ _____

Discount (if applicable): \$ _____

Final Total: \$ _____

Shipping & Handling

Shipping Method: Standard Expedited Pickup Other: _____

Tracking Number (if available): _____

Acknowledgment

The vendor confirms acceptance of this order and agrees to the terms stated.

Vendor Representative: _____ Date: _____

Purchaser Representative: _____ Date: _____