

Purchase Order



Customer ID _____

PO. _____

Date: _____

Quantity	Description	Unit Price	Total
Bill To		Ship To	
		Subtotal	
		Sales Tax	
		Total	

PAY BY CREDIT CARD (VISA/MC/DISCOVER)

CREDIT CARD NO. _____ EXP. DATE: _____

NAME ON CREDIT CARD: _____

CREDIT CARD BILLING ADDRESS: _____

AUTHORIZE SIGNATURE: _____

BY SIGNING HERE, CUSTOMERS ARE GIVING AUTHORITY TO RAMAYAN SUPPLY TO CHARGE TOTAL INVOICE ON ACCOUNT.

Make all checks payable to RAMAYAN SUPPLY

Thank you for your business!

West Columbia, SC 27-C.Trotter Road, West Columbia, SC 29169 Toll Free: (800)745-7940 Local: (803) 926-9777 Fax: (803) 926-2291
Richmond, VA 4309, November Ave, Henrico, VA 23231 Toll Free: (855)726-2926 Local: (804) 308-2755 Fax: (877) 797-4931

Email: orders@ramayansupply.com | Web: www.ramayansupply.com

Fax this order to (803) 926-2291