|  |
| --- |
| NON PROFIT CORPORATION NAME |
| ADDRESS |

## PURCHASE ORDER

|  |  |
| --- | --- |
| ***Attn:*** | Executive Director Name |
| ***Vendor Information:*** |  |
| ***Ship To:*** |  |
| ***Bill To:*** |  |

|  |  |  |
| --- | --- | --- |
| P.O. Date | NPC Account | Investigator Signature |
|  |  |  |

***\* By my signature, I certify this order as necessary to my research.***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Quantity | Catalog # | Description | ***Unit Price*** | ***Total*** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  | Hazardous Material Charge |  |
|  |  | Shipping & Handling |  |
|  |  | ***Sales Tax*** |  |
|  |  | ***Total*** |  |

NPC Use Only:

|  |  |  |  |
| --- | --- | --- | --- |
| ***Approved by:*** |  | ***Date:*** |  |
| ***Payment Method:*** |  | ***Date Ordered:*** |  | ***Date Received:*** |  |