

Compart Sdn. Bhd

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PURCHASE ORDER

PO Number: _____ Date: _____

To:
Company Name: _____
Address: _____

Tel: _____ | Email: _____

No.	Item Description	Quantity	Unit Price (RM)	Total (RM)
Total				

Delivery Deadline: _____
Delivery Address: _____

Payment Terms: _____

Issued By: _____

Name: _____
Designation: _____
Company: _____