



# Purchase Order

## Check Manufacturer:

- |                                   |  |                                 |
|-----------------------------------|--|---------------------------------|
| <input type="checkbox"/> Brintons | <input type="checkbox"/> Chilewich       | <input type="checkbox"/> Durato |
| <input type="checkbox"/> Encore   | <input type="checkbox"/> Matter Surfaces | <input type="checkbox"/> Nydree |
| <input type="checkbox"/> PURline  | <input type="checkbox"/> TAJ             | <input type="checkbox"/> Zandur |

Rep Name	
Project Name	
Order Date	
Specifier	

Bill to:	
Company	
Name	
Street Address	
City	
State	
Zip	
Email	
Phone	

Ship to: <input type="checkbox"/> Same address as billing	
Company	
Name	
Street Address	
City	
State	
Zip	
Email	
Phone	

SKU	Descriptor	Project <input type="checkbox"/> Sq. Ft. <input type="checkbox"/> Sq. Yd.	# of Cartons <i>If applicable</i>	# of Rolls <i>If applicable</i>	Price per Sq. Ft.	Subtotal

## Instructions and/or comments:

- ☐Shipping to residential ☐Shipping to Business ☐Loading dock available ☐Lift gate needed  
Other instructions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated Total  
*(does not include Freight)*

\$

Desired Ship Date: