

Safe and Vault Store

GENERAL PURCHASE ORDER INFORMATION

Instructions:

Please complete this document and submit with your Credit Application form.

Date: _____

Purchase Order #: _____

Bill To: _____

Billing Telephone: _____

E-mail Address: _____

Ship To: _____

Shipping Telephone: _____

Item Description and Part Number(s):	Price
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Subtotal	_____
Shipping	_____
Delivery	_____
Tax	_____
TOTAL	_____

Print Name: _____ Signature: _____

Date: _____

By signing, you agree to remit full payment for the total amount listed above within ten (10) days from date of invoice. SafeandVaultStore will send invoice once products is shipped from point of origin to the shipping address noted above. Please include a purchase order number if you would like to reference your order on future communications. Please retain a copy of this information for your records.

*****Please note: Purchase order terms, if different than those of SafeandVaultStore will not be accepted.*****

SafeandVaultStore
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