

CHAPLAINS' FUND PURCHASE ORDER AND RECEIVING RECORD For use of this form, see DA PAM 165-18; the proponent agency is CCH				1. PO NUMBER 87412	
2a. ORDER FROM <i>(Ship/Invoice Address)</i> Dragonfly Inn		2b. PHONE 878-555-1100		3. DATE <i>(YYYYMMDD)</i> 20200127	
2d. ACCOUNT NUMBER		2c. FAX		4. SHIPPING INSTRUCTIONS	
2e. STATE TAX ID NUMBER					
5. TO Jackson Produce					
6a. QTY	6b. ITEM DESCRIPTION	6c. UNIT	6d. UNIT COST	6e. TOTAL	
5	Services	4574	250	1,250	
6f. SHIPPING TOTAL					
6g. PURCHASE ORDER TOTAL				1,250	
MARK ALL PACKAGES/PAPERS/INVOICES WITH PURCHASE ORDER NUMBER					
7a. PRINTED NAME OF FUND MANAGER			7b. SIGNATURE OF FUND MANAGER		
8. NOTICES TO VENDOR a. No appropriated U.S. Government funds will be paid as a result of this order. b. This order is not valid after 90 days from the date of issuance. All items must be shipped within 90 days from the date of this PO. c. This is a firm order only if your price does not exceed the maximum line item or total price on this order. If you cannot perform in exact accordance with this order, withhold performance and notify the Fund Manager. d. For subscription orders, see attached statement.					
9. RECEIVING RECORD					
a. RECEIVED VIA		b. DATE <i>(YYYYMMDD)</i>		c. CONDITION <input type="checkbox"/> GOOD <input type="checkbox"/> DAMAGED	
d. EXCEPTIONS					
e. RECEIVED BY <i>(Printed Name)</i>			f. SIGNATURE		