

FROM:

# PURCHASE ORDER

The following number must appear on all related correspondence, shipping papers, and invoices:

**P.O. NUMBER** \_\_\_\_\_

TO:

**Weber Custom Fab WCF**

**Shipping Department:**

429 W Railroad Avenue

Bruce, WI 54819

PH: (715) 868-1935

FX: (715) 868-1937

**Office / Mailing Address:**

W3559 Circle Road

Glen Flora, WI 54526

PH: (715) 403-1290

FX: (715) 322-5542

SHIP TO:

P.O. DATE	REQUESTED BY	SHIPPING METHOD	DATE REQUIRED	TERMS

QTY	DESCRIPTION		UNIT PRICE	TOTAL
TOTAL				

1. Please send one copy of your Purchase Order.
2. Enter this order in accordance with the prices, terms, delivery method, and specifications listed above.
3. Please notify us immediately if you are unable to ship as specified.

\_\_\_\_\_  
Authorized by

\_\_\_\_\_  
Date