

# PURCHASE ORDER



ADE

Date:	20-Oct-20
PR No	No

<b>ISSUED BY:</b>	<b>ADRA Yemen</b>
MANR Program - Aden, Yemen	
Contact person:	
Phone/Fax:	
E-mail:	

<b>ISSUED TO:</b>	<b>Supplier 1</b>
Name:	
Address:	
Phone:	01429199 - supplier1@gmail.com
Contact:	Ahmed Ahmed

<b>SHIP TO:</b>	ADRA Aden sub Office
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<b>SPECIAL INSTRUCTIONS:</b>
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<b>P.O. Prepared by :</b>	
<b>SHIPPING TERMS:</b>	
<b>DELIVERY DATE:</b>	

<b>CURRENCY:</b>	USD	1 USD =	600	USD
<b>PAYMENT TER</b>				
<b>FINANCE CODE</b>	SMAN071019	ADEN	Other 8983	Other Direct Cost

ITEM	Qty.	UNIT	DESCRIPTION	UNIT COST	EXTENDED COST
1	1	PC	Pharmaceutical		
2					
3					
4					
5					
6					
7					
8					
9					
10					

<b>Project Reference:</b>		<b>TOTAL EX-WORKS</b>	
		<b>TAXES</b>	Included
		<b>SHIPPING</b>	Included
		<b>INSURANCE</b>	Included
		<b>TOTAL INVOICE</b>	USD

**Authorized on behalf of ADRA YEMEN:**

Name :

Title: Country Director

Signature:

Date: 5/30/2021

Financial Review

**Authorized on behalf of Vendor:**

Name: Supplier 1

Title: manager

Signature:

Date: 30-May-21

Understood and agreed with Conditions of Purchase

Please refer to this Purchase Order number in all correspondence concerning the order.

Form Distribution: (Original) to Finance, (Original) to Vendor