Suppliers Copy
Accounts Copy
Accounts Copy
Prod. Office Copy
Buyer Copy
Yellow

OR PURCHASE ORDER NO.

FILM TITLE					
SUPPLIER					
ADDRESS					
	EMAIL	DATE			
	PLEASE SUPPLY THE FOLLOWING (300D2 OR	SERVICE	<u> </u>	
QUANTITY	DESCRIPTION		VALUE	VA	Т
	IRCHASE				
	TENIDIA				
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*HIRE TERM	1S COMMENCIN	G DATE	FOR) M	EEKS
	NVOICE WILL BE ACCEPTED UNLESS ABO				LLNO
ORDERED BY	<i>,</i>				
SET NI IMBED	·		APPROVED	BY	
ACCOUNTS C	CODE No:		BUYER		



SERVICES PURCHASE ORDER RENTAL

Suppliers Copy Accounts Copy Accounts Copy Prod Office Copy Buyer or Dept Copy White Yellow Pink Green Blue

P.O. NO:

SUPPLIER	DA ⁻	DATE:							
ADDRESS	SS: CURRENCY (THIS P.O.):								
	EMAIL:								
	TEL NO:								
Ple	ase supply the following goods or services on the terms & condi								
QUANTITY	DESCRIPTION	ITEM PRIC (EXCL. VAT							
	UKCHASE OF								
	TEMBIATE								
	I CIVIT LAIL								
	TOTAL (E	EXCL. VAT	7)						
COMME	NCING DATE: FINISH DATE: FOR	R· WFF	KS / MONTH	is					
	HIRE TERMS: % PER:								
1.) PLEASE	INDICATE WITH (A) WHERE ITEM ORDERED IS AN "ASSET"								
2.) PURCH	ASE ORDER IS INVALID UNTIL APPROVED BY UPM AND FC DICE WILL BE ACCEPTED FOR PAYMENT UNLESS ABOVE ORD	ER NUMBER	R IS QUOTE	D					
ORDERED	BY: APPROVED:	HoD).						
ACCOUNTS	S CODE / SET NO: APPROVED:	U.P.N							
SET NAME:	APPROVED:	PROD. CON	TROLLER						

	☐ PURCHASE or] RE	NTAL (ORDE F	3			
				PU	RCHASE C	ORDER#:			
SUPPLI	IER INFO		٦			on all: Invoices, ading, Receipts			
COMPA	ANY:			DIRE	CT ALL IN	IVOICES TO:			
ADDRE	EGG.		7						
ADDRE	200:		1						
CONTA	ACT NAME:								
PHONE	3: 								
EMAIL	<u></u>			RELA	TED PAR	TY RENTAL:	YES.	NO	<u> </u>
	ASE SUPPLY THE FOLLOWING GOODS OR SER THE TERMS AND CONDITIONS SET OUT OVERI			DATE	3:		٦٢	ACCOU!	
Qty	Description (Item/Intended Use)			Rental Beginning Date	Rental Ending Date	Total (Exc. V	'AT)	Account	
	PURCHAS TEMPI			Total	al (Exc. VAT):	RD 3		Curre	ency:
	HASE ORDER NOT VALID UNTIL APPROVED BY UPM AN OST PRODUCTION EXECUTIVE IF REGARDING POST ACT			10.0	VAT:			USD GBP	
					TOTAL:			EURO OTHER	
	NO INVOICE WILL BE ACCEPTED UNL	ESS	S ABOV	VE ORDER	R NUMBE	R IS QUOTE	<u>D</u>		
REQUES	STOR NAME/DEPARTMENT		DEPT	APPROVAL	ACCOUNTA	ANT APPROVAL	J	UPM APPROV	/AL
1	·	(ľ	4	'	1	,			

	☐ PURCHASE or [R	PO NUMBER: Date Ordered:					
SUPPLIER:				RENTAI	DETAILS:			
Address:				Start Da	te:			
				End Dat	e:			
				No. of w	eeks:			
					by:			
Phone:				Dept:				
Fax: Contact:				Set No: Acct. Co				
This P Com	NO INVOICE WILL B MENT IS NOT GUARAN urchase Order is subject to an upany and Supplier relating to uction Company, If there is no overleaf which shall	ITEED UNLESS OR and governed by the terms the goods or services wh	DER HAS of any fully- lich has been ent, this Pure	BEEN AU executed written signed by a chase Order is	THORISED BY ten agreement betw duly authorised rep s subject to the Terr	PRODUCTION Veen the Production of the Production	ction ne	
Quantity	Descrip	tion	Asset	Unit Cost	Subtotal	Account	s Detail	
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					1			
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Delivery / C	Collection:					Comme		
Delivery / Collection:			NE1	г	Curre	∌ncy:		
						USD GBP		
						EURO		
						OTHER		
Dept Head:		UPM / Producer:			Accounting:			
					-			

PURCHASE ORDER

								P.O	.#
DAT	[Г		R ON ALL INVOICES
DAT					1		-	DIRECT ALL IN	VOICES TO:
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VAT	#								
CON	NTACT								
PHC	DNE				1				
	CUACE/DE	NTAL (simple of	ma) DENTAL	DEDIC)]		4.		CUDD.
PUR	CHASE/RE	NTAL (circle o	one) KENIAI	LPERIC	טע:		# DAYS /		CURR:
QTY		DESCRIPTION (ITEM/	INTENDED USE)		UNIT P	RICE	WEEKS OF HIRE	TOTAL	ACCOUNT CODING
		DO							
		RG	7						//EK
			- R // I						
							Subtotal:		
SET							VAT:		
ACC	T CODE:						TOTAL:		_
1.) PL	EASE INDIC	ATE WHERE ITE	EM ORDERED I	S AN "AS	SSET" E	BY US	_		
2.) PU	IRCHASE OF	RDER IS INVALII	D UNTIL APPRO	OVED BY	UPM A	ND F	INANCIA	L CONTROLLER	
		ILL BE ACCEPT RE SUBJECT T						NUMBER IS QU OVERI FAF	OTED
	QUESTED BY	DEPT	DEPT APPROVAL	ACCOL	JNTS		UPM PROVAL	STUDIO APPROVAL	TRANS#

REQUESTED BY	DEPT	APPROVAL	APPROVAL	APPROVAL	APPROVAL	TRANS#

Supplier's Copy: White Accounts Copy: Blue Accounts Copy: Green Department Copy: Pink