



TEMAK

Teenage Mothers and Girls Association of Kenya

Purchase Order Form

TEMAK
P.O Box 3531
Kisumu, Kenya 40100
Tel +254-57-202-7028
Mobile +254-722-271-066
temak@mailkisumu.com
www.afrikapamoja.org

Date _____

Full Name _____

Postal Address _____

Telephone Number _____ Fax _____

Delivery Address _____

Email Address _____

Quantity	Item	Product Code	Total	Shipped

Office use only

Shipping _____

Dispatch Date _____	Invoice No _____
Consigned to _____	No. of Parcels _____
_____	Consignment No _____
Packed by _____	_____

Total _____

Paid _____

Buyers Signature _____

Producer Signature _____