



**HARRISON SPORTSMAN'S CLUB, INC.**  
**P.O. Box 548**  
**HARRISON, MICHIGAN 48625**  
**Phone 989-539-1825**

<b>PURCHASE ORDER AGREEMENT</b>	DATE: _____
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Bill To: _____	For: _____
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DESCRIPTION	COST PER ITEM	QUANTITY	AMOUNT

APPLICABLE  
TAX

REQUESTED BY: \_\_\_\_\_

**TOTAL**

AUTHORIZED BY: \_\_\_\_\_

SIGNATURE

PRINT NAME

SIGNATURE

PRINT NAME