



PURCHASE ORDER FORM

M156.02 22/05/2026

CUSTOMER DATA COLLECTION

Company name	<input type="text"/>		
Registered office address	<input type="text"/>		
City	<input type="text"/>	ZIP code	<input type="text"/>
Country	<input type="text"/>	Region	<input type="text"/>
Telephone	<input type="text"/>	Fax	<input type="text"/>
E-mail	<input type="text"/>	PEC	<input type="text"/>
Tax code	<input type="text"/>	VAT n.	<input type="text"/>
SDI code	<input type="text"/>	NSO order endpoint	<input type="text"/>

Delivery Address

Address	<input type="text"/>		
City	<input type="text"/>	ZIP code	<input type="text"/>
Country	<input type="text"/>	Region	<input type="text"/>

CONTACTS

Purchasing Department Contact Person

Administrative Department Contact Person

BANKING DETAILS

Bank	<input type="text"/>
Branch	<input type="text"/>
ABI	<input type="text"/>
CIN	<input type="text"/>
Swift/BIC	<input type="text"/>
City	<input type="text"/>
CAB	<input type="text"/>
Account No	<input type="text"/>
IBAN	<input type="text"/>

