



# Purchase Order

## UNT Health Science Center

UNT System Business Service Center  
Denton TX 76205  
United States

CHANGE ORDER		Dispatch Via Email
<b>Purchase Order</b> HS763-0000161602	<b>Date</b> 09-01-2021	<b>Revision</b> 1 - 2022-05-03
<b>Payment Terms</b> 30 days	<b>Freight Terms</b> Dest, prepay & add	<b>Ship Via</b> GROUND
<b>Buyer</b> Roys,Jill Kathryn	<b>Phone/ Email</b> 940/369-5500 Jill.Roys@untsystem.edu	<b>Currency</b>

**Supplier:** 0000004696  
Oral&Maxillofacial Network  
1500 S Main St  
Fort Worth TX 76104  
United States

**Ship To:** This is not a valid  
Purchase Order.  
This document is  
reproduced for reporting  
purposes only.

**Attention:** Correctional  
Medicine

**Bill To:** UNT System Business  
Service Center  
Send Invoices to:  
invoices@untsystem.edu  
1112 Dallas Dr., Ste.  
4000  
Denton TX 76205  
United States

Tax Exempt?		Tax Exempt ID:	Replenishment Option: Standard				
Line- Sch	Item/Description	Mfg ID	Quantity	UOM	PO Price	Extended Amt	Due Date
1 - 1	FY 22 Blanket PO for FMC Fort Worth provider services from 9-1-21 to 8-31- 22. Must pay within 7 business days of EOB date per contract terms.		1.00	EA	10000.00	10000.00	07/23/2021

**Schedule Total** 10000.00

**Total PO Amount** 10000.00

Authorized Signature