**UNT Health Science Center**  
**UNT System Business Service Center**  
Denton TX 76205  
United States

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**Purchase Order**

<table>
<thead>
<tr>
<th>Purchase Order</th>
<th>Date</th>
<th>Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>HS763-0000162526</td>
<td>09-20-2021</td>
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</tbody>
</table>

**Payment Terms**

<table>
<thead>
<tr>
<th>Price Terms</th>
<th>Freight Terms</th>
<th>Ship Via</th>
</tr>
</thead>
<tbody>
<tr>
<td>30 days</td>
<td>Dest. prepaid &amp; add</td>
<td>GROUND</td>
</tr>
</tbody>
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**Buyer**

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone/ Email</th>
<th>Currency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laduke, Rebecca A</td>
<td>940/369-5500 Rebecca. <a href="mailto:Laduke@untsystem.edu">Laduke@untsystem.edu</a></td>
<td></td>
</tr>
</tbody>
</table>

**Ship To:**

This is not a valid Purchase Order. This document is reproduced for reporting purposes only.

**Attention:** Willed Body Program

**Bill To:**

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

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**Line-Sch** | **Sch** | **Item/Description** | **Mfg ID** | **Quantity** | **UOM** | **PO Price** | **Extended Amt** | **Due Date** |
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>1 - 1</td>
<td>1</td>
<td>Transportation for Cadaver Pickup/Delivery</td>
<td>0000017860</td>
<td>1.00</td>
<td>EA</td>
<td>9000.00</td>
<td>9000.00</td>
<td>08/31/2022</td>
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**Schedule Total**  
9000.00

**Total PO Amount**  
9000.00

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**Authorized Signature**