

## **Purchase Order**

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## **UNT Health Science Center**

UNT System Business Service Center Denton TX 76205 United States

CHANGE ORDER		Dispatch Via Email
Purchase Order	Date	Revision
HS763-0000163204	11-04-2021	1 - 2021-11-10
Payment Terms	Freight Terms	Ship Via
30 days	Dest, prepay & add	GROUND
Buyer	Phone/ Email	Currency
Laster,Tawana Faye	940/369-5500	
	Tawana.	
	Laster@untsystem.ed	u

Supplier: 0000004329 Texas Christian University Sponsored Programs TCU Box 297023 Fort Worth TX 76129 United States This is not a valid Purchase Order. This document is reproduced for reporting purposes only.

Ship To:

**Attention:** Family Medicine- **Bill To:** Gen

**Total PO Amount** 

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

Denton TX 76205 United States

37239.00

Tax Exem Line- Sch	pt? Item/Description	Tax Exempt ID: Mfg ID	Quantity	Reple UOM	enishment Opt PO Price	ion: Standard Extended Amt	Due Date
1 - 1	Subcontract with TCT	J	1.00	AN	37239.00	37239.00	11/03/2021
				Schedule Total		37239.00	

Authorized Signature