## Purchase Order

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

**Supplier:** 0000020254  
Cuevas Distribution Airgas Products  
3719 North Main St  
Fort Worth TX 76106  
United States

**Ship To:**  
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**Attention:** Institute for Healthy Aging  
Bill To: UNT System Business Service Center  
Send Invoices to: invoices@untsystem.edu  
1112 Dallas Dr., Ste. 4200  
Denton TX 76205  
United States

### Payment Terms
- **30 days**
- **Freight Terms:** Dest. prepay & add
- **Ship Via:** GROUND

### Buyer
- **Laduke, Rebecca A**  
  Phone/ Email: 940/369-5500  
  Rebecca.Laduke@untsystem.edu

### Supplier Information
- **Supplier:** 0000020254  
  Cuevas Distribution Airgas Products  
  3719 North Main St  
  Fort Worth TX 76106  
  United States

### Tax Exempt?
- **Tax Exempt ID:** Replenishment Option: Standard

### Line-Sch Item/Description Mfg ID Quantity UOM PO Price Extended Amt Due Date

<table>
<thead>
<tr>
<th>Line-Sch</th>
<th>Item/Description</th>
<th>Mfg ID</th>
<th>Quantity</th>
<th>UOM</th>
<th>PO Price</th>
<th>Extended Amt</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – 1</td>
<td>FY23 Blanket PO for various tanks, also includes cylinder charge</td>
<td></td>
<td>1.00</td>
<td>EA</td>
<td>825.00</td>
<td>825.00</td>
<td>08/31/2023</td>
</tr>
</tbody>
</table>

**Schedule Total** 825.00

**Total PO Amount** 825.00

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**Authorized Signature**