**Purchase Order**

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

<table>
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<tr>
<th>Line</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>
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<td>1 - 1</td>
<td>First Visit - Travel, diagnosis, parts identification</td>
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<td>2.00</td>
<td>EA</td>
<td>125.00</td>
<td>250.00</td>
<td>11/02/2022</td>
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<td>If needed Second Visit - Travel, Labor to install part and testing</td>
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<td>EA</td>
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<td>11/02/2022</td>
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**Total PO Amount:** 2875.00

**Bill To:** UNT System Business Service Center
- **Send Invoices to:** invoices@untsystem.edu
- **Address:** 1112 Dallas Dr., Ste. 4200
- **City:** Denton
- **State:** TX
- **Zip:** 76205
- **Country:** United States

**Attention:** Pharmaceutical Sciences

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**Dispatch Via Email**

**Purchase Order Number:** HS763-0000166993
- **Date:** 11-03-2022
- **Revision:**

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

**Supplier:** 0000002155
- **SPBS Inc**
- **Address:** 4431 Long Prairie Road Suite 100
- **City:** Flower Mound
- **State:** TX
- **Zip:** 75028
- **Country:** United States

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

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**Authorized Signature**