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

---

**Authorized Signature**

---

**UNT Health Science Center**

**UN System Business Service Center**

Denton TX 76205

United States

---

**Purchase Order**

<table>
<thead>
<tr>
<th>Purchase Order</th>
<th>Date</th>
<th>Revision</th>
</tr>
</thead>
<tbody>
<tr>
<td>HS763-0000168966</td>
<td>05-30-2023</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Payment 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>
</table>

<table>
<thead>
<tr>
<th>Buyer</th>
<th>Phone/ Email</th>
<th>Currency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morales, Gabriel Adrian</td>
<td>940/369-5500 Gabriel. <a href="mailto:Morales@untsystem.edu">Morales@untsystem.edu</a></td>
<td></td>
</tr>
</tbody>
</table>

**Supplier:** 0000017204  
Board of Regents University of Oklahoma  
Health Science Center  
PO Box 26901 URP 865 Ste 490  
Oklahoma City OK 73126-0901  
United States

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

**Attention:** Library

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

---

**Line-Sch** | **Item/Description** | **Tax Exempt ID:** | **Mfg ID** | **Quantity** | **UOM** | **PO Price** | **Extended Amt** | **Due Date** | **Schedule Total** | **Total PO Amount** |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1 – 1</td>
<td>Subaward: OU HSC Tulsa</td>
<td></td>
<td></td>
<td>1.00</td>
<td>AN</td>
<td>8000.00</td>
<td>8000.00</td>
<td>04/30/2024</td>
<td>8000.00</td>
<td>8000.00</td>
</tr>
</tbody>
</table>