



Purchase Order

UNT Health Science Center

UNT System Business Service Center
Denton TX 76205
United States

DUPLICATE		Dispatch Via Print
Purchase Order HS763-HS00000442	Date 08-10-2023	Revision
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	Currency

Supplier: 0000001281
Covetrus North America
PO Box 734579
Chicago IL 60673-4579
United States

Ship To: This is not a valid
Purchase Order.
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purposes only.

Attention: CLARK/FERIS

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

Tax Exempt?		Tax Exempt ID:			Replenishment Option: Standard			
Line-Sch	Item/Description	Mfg ID	Quantity	UOM	PO Price	Extended Amt	Due Date	
1 - 1	Acepromazine Injectable solution, 10mg/mL		1.00	EA	27.34	27.34	08/10/2023	
Schedule Total						<u>27.34</u>		
2 - 1	KETAMINE HYDROCHLORIDE INJECTION, 100MG/ML, C3N		5.00	EA	7.18	35.90	08/10/2023	
Schedule Total						<u>35.90</u>		
Total PO Amount						63.24		

Authorized Signature