



# Purchase Order

## UNT Health Science Center

UNT System Business Service Center  
Denton TX 76205  
United States

<b>DUPLICATE</b>		<b>Dispatch Via Print</b>
<b>Purchase Order</b> HS763-HS00000820	<b>Date</b> 09-18-2023	<b>Revision</b>
<b>Payment Terms</b> 30 days	<b>Freight Terms</b> Dest, prepay & add	<b>Ship Via</b> GROUND
<b>Buyer</b> Morales,Gabriel Adrian	<b>Phone/ Email</b> 940/369-5500 Gabriel. Morales@untsystem.edu	<b>Currency</b>

**Supplier:** 0000002430  
MCKESSON MEDICAL-  
SURGICAL GOVERNMENT  
SOL  
PO Box 936279  
Atlanta GA 31193-3027  
United States

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

**Attention:** Jessica Powers

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

**Excise Registration Code:** 2023-1029

Tax Exempt?		Tax Exempt ID:	Replenishment Option: Standard				
Line- Sch	Item/Description	Mfg ID	Quantity	UOM	PO Price	Extended Amt	Due Date
1 - 1	Service Form Request		1.00	EA	60000.00	60000.00	09/18/2023
<b>Schedule Total</b>						<u>60000.00</u>	
<b>Total PO Amount</b>						<input type="text" value="60000.00"/>	

**Authorized Signature**