

## **Purchase Order**

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## **UNT Health Science Center**

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

DUPLICATE		Dispatch Via Print
Purchase Order	Date	Revision
HS763-HS00000829	09-18-2023	
Payment Terms	Freight Terms	Ship Via
30 days	Dest, prepay & add	GROUND
Buyer	Phone/ Email	Currency
Laduke,Rebecca A	940/369-5500	
	Rebecca.	
	Laduke@untsystem.ed	lu

**Supplier:** 0000002430 MCKESSON MEDICAL-SURGICAL GOVERNMENT SOL PO Box 936279

Atlanta GA 31193-3027 **United States** 

Excise Registration Code: 2023-1029

This is not a valid Purchase Order. This document is reproduced for reporting purposes only.

Ship To:

Attention: Jessica Powers

**UNT System Business** Bill To: 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	Service Form Request		1.00	EA	15000.00	15000.00	09/18/2023
				Schedule Total		15000.00	

**Total PO Amount** 15000.00

**Authorized Signature**