

UNT Health Science Center UNT System Business Service Center			DUPLICATE				Dispatch Via Print		
			ase Order 3-HS0000252	22	Date 02-05-2024		Revision		
Denton TX 76205 United States		Payment Terms 30 days			Freight Terms Dest, prepay & add		Ship Via GROUND		
		Buyer	BuyerPhone/ EmailLaduke,Rebecca A940/369-5500Rebecca.Laduke@untsystem				<b>Currency</b> edu		
Supplier: 0000001542 Reese,Sherry A 4409 Bombay Ct Fort Worth TX 76116-8165 United States	Purc This repr	s is not a valid chase Order. s document is roduced for rep poses only.		ention: Je	ssica Powers I	Bill To:	Service Co Send Invo invoices@	ices to: untsystem.edu as Dr., Ste.	
Excise Registration Code: 2024-0304									
	a Exempt ID: Mfg ID		Quantity	UOM	Replenishmer PO Price		: Standard nded Amt	Due Date	
1 - 1 Service Form Request			1.00	EA	108861.00	1	08861.00	02/05/2024	
			Schedule Total			1	108861.00		

**Total PO Amount** 

108861.00