

UNT Health Science Center UNT System Business Service Center Denton TX 76205 United States		DUPLICATE				Di	Dispatch Via Print		
		Purchase Order HS763-HS00004009 Payment Terms 30 days			Date 05-28-2024 Freight Terms Dest, prepay & add Phone/ Email 940/369-5500 Rebecca.		Revisior	1	
							Ship Via GROUND Currency		
									Buyer
		Laduke,Rebecca A							
									Laduke@untsystem.
Supplier:000010273Ship To:NicheVision Forensics LLC526 S Main St Ste 714GAkron OH 44311United States	This is not Purchase This docu reproduce purposes	Order. ment is ed for rep		ention: Az		Bill To:	Service Co Send Invo invoices@	ices to: untsystem.edu as Dr., Ste.	
Tax Exempt? Tax Exempt ID:				Replenishment O			otion: Standard		
Line- Item/Description Mfg ID Sch			Quantity	UOM	PO Pric		ended Amt	Due Date	
1 - 1 STRMix Workshop			2.00	EA	650.0	0	1300.00	05/28/2024	
				Sch	chedule Total		1300.00		

Total PO Amount

1300.00