

UNT Health Science Center UNT System Business Service Center Denton TX 76205 United States			DUPLICATE				Di	Dispatch Via Print		
			Purchase Order HS763-HS00005089 Payment Terms 30 days			Date 09-01-2024 Freight Terms Dest, prepay & add		Revision	า	
								a		
								Ship Via GROUND		
				Buyer Morales,Gabriel Adrian			Phone/ Email 940/369-5500 Gabriel. Morales@untsystem.edu		Currency	
	Supplier: 0000039425 Sanchez,Idalia 3555 S Leisure World Blv Apt 2B Silver Spring MD 20906- 1711 United States	-	This is not Purchase This docu reproduce purposes	Order. ment is d for rep		ention: E	isha DeClue	Bill To:	Service Construction Send Invo invoices@	ices to: untsystem.edu as Dr., Ste. ( 76205
Excise	Registration Code: 2024-012	3								
Tax Ex Line- Sch	empt? Item/Description	Tax Exempt ID: Mfg ID			Quantity	UOM	Replenishm PO Prio		: Standard nded Amt	Due Date
1 - 1	PSA-Idalia Sanchez				1.00	EA	55000.0	00	55000.00	09/03/2024
						Schedule Total				

**Total PO Amount** 

55000.00