



# 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><br>HS763-HS00005563 | <b>Date</b><br>09-01-2024  | <b>Revision</b>           |
| <b>Payment Terms</b><br>1 Day Pay         | <b>Freight Terms</b><br>Dest, prepay & add                               | <b>Ship Via</b><br>GROUND |
| <b>Buyer</b><br>Morales,Gabriel Adrian    | <b>Phone/ Email</b><br>940/369-5500<br>Gabriel.<br>Morales@untsystem.edu | <b>Currency</b>           |

**Supplier:** 0000002430  
MCKESSON MEDICAL-  
SURGICAL GOVERNMENT  
SOL  
PO Box 933027  
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?<br>Line-<br>Sch | Item/Description | Tax Exempt ID:<br>Mfg ID | Quantity | UOM | Replenishment Option: Standard<br>PO Price | Extended Amt                          | Due Date   |
|-----------------------------|------------------|--------------------------|----------|-----|--|---------------------------------------|------------|
| 1 - 1                       | Student Health   |                          | 1.00     | EA  | 50000.00                                   | 50000.00                              | 09/26/2024 |
| <b>Schedule Total</b>       |                  |                          |          |     |  | <u>50000.00</u>                       |            |
| <b>Total PO Amount</b>      |                  |                          |          |     |  | <input type="text" value="50000.00"/> |            |

**Authorized Signature**