

## **Purchase Order**

**Page:** 1 of 1

## **UNT Health Science Center**

UNT System Business Service Center Denton TX 76205 United States

DUPLICATE		Dispatch Via Print
Purchase Order	Date	Revision
HS763-HS00006701	12-19-2024	
Payment Terms	Freight Terms	Ship Via
30 days	Dest, prepay & add	GROUND
Buyer	Phone/ Email	Currency
Morales, Gabriel Adrian	940/369-5500	-
	Gabriel.	
	Morales@untsystem.ed	lu

Supplier: 0000041866 Boston Medical Center 960 Massachusetts Ave Ste

Boston MA 02118-2690 United States This is not a valid Purchase Order. This document is reproduced for reporting purposes only.

Ship To:

Attention: Laura Rivera

Bill To: UNT System Business Service Center Send Invoices to: invoices@untsystem.edu

1112 Dallas Dr., Ste. 4200

Denton TX 76205 United States

Tax Exem Line- Sch	pt? Item/Description	Tax Exempt ID: Mfg ID	Quantity	UOI		Coption: Standard Extended Amt	Due Date
1 - 1	CDP Subaward to Boston Medical Center Line 1	r	1.00	EA	25000.00	25000.00	01/07/2025
				Schedule Total		25000.00	
2 - 1	CDP Subaward to Boston Medical Center Line 2	r	1.00	EA	475022.00	475022.00	01/07/2025
					Schedule Total	475022.00	
					Total PO Amount	500022.00	

**Authorized Signature**