



# Purchase Order

## UNT Health Science Center

UNT System Business Service Center  
Denton TX 76205  
United States

| DUPLICATE                                 |                                                                          | Dispatch Via Print        |
|-------------------------------------------|--------------------------------------------------------------------------|---------------------------|
| <b>Purchase Order</b><br>HS763-HS00010979 | <b>Date</b><br>09-01-2025                                                | <b>Revision</b>           |
| <b>Payment Terms</b><br>30 days           | <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:** 0000048231  
Deborah A Shelton  
32 Ortanola Ct  
Brevard NC 28712-0640  
United States

**Ship To:** This is not a valid  
Purchase Order.  
This document is  
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purposes only.

**Attention:** Elisha DeClue

**Bill To:** UNT System Business  
Service Center  
Send Invoices to:  
invoices@untsystem.edu  
1112 Dallas Dr., Ste.  
4200  
Denton TX 76205  
United States

| Tax Exempt?     |                     | Tax Exempt ID: |          | Replenishment Option: Standard |          |              |            |
|-----------------|---------------------|----------------|----------|--------------------------------|----------|--------------|------------|
| Line-Sch        | Item/Description    | Mfg ID         | Quantity | UOM                            | PO Price | Extended Amt | Due Date   |
| 1 - 1           | Deborah Shelton_PSA |                | 1.00     | EA                             | 15000.00 | 15000.00     | 09/09/2025 |
| Schedule Total  |                     |                |          |                                |          | 15000.00     |            |
| Total PO Amount |                     |                |          |                                |          | 15000.00     |            |

Authorized Signature