STUDENT HEALTH SERVICES
TEXAS A&M UNIVERSITY

DIVISION OF STUDENT AFFAIRS

Purchase Order

(979) 458-8260

purchasing@shs.tamu.edu

Order Date		**SHIP TO:**	**INVOICE TO:**
P.O. #		ATTN: Receiving	ATTN: Accounts Payable
Vendor		Student Health Services	Student Health Services
Vendor Account #		A.P. Beutel Room 008	1264 TAMU
SHS Account #		College Station, TX 77843-1264	College Station, TX 77843-1264

Quantity	Item #	Description	Unit	Cost	Extended Cost
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
				TOTAL:	$0.00

This is to authorize _____ to purchase the item(s) listed above or per attached.

Unit Manager Approval:	Date:
Administrative Approval:	Date: