



Texas Department of Insurance
Purchase Order # 45400 16-0904

Payment Terms: **NET30** Freight Terms: **FOB Destination** Ship Via: **VNDR** PCC: **0** Date: **01/15/16** PO Method: **EX** Dispatch: **Dispatch Via Print** Rev Dt:

PLEASE NOTE: ADDITIONAL TERMS AND CONDITIONS ARE LISTED AT THE END OF THE PURCHASE ORDER.

Vendor: R DAVID BAUER MD
 1130 BELT LINE RD STE 135
 GARLAND TX 750403667
 United States

Ship To: 2M0001
 7551 Metro Center Drive, Suite 100
 Austin TX 78744
 United States

Vendor ID: 1752763764

Purchaser: JoAnn Johnson
Phone: 512/676-6150
Fax: 512/463-6159
Email: joann.johnson@tdi.texas.gov

Bill To: Attn: Acctng - Mail Code 108-3A
 P. O. Box 149104
 Austin TX 78714-9104
 United States

Fax:
Email: Invoices@tdi.texas.gov

PO Information:
 Professional Services for test development. R. David Bauer M.D.

Invoicing. To ensure prompt payment, the vendor must include the following information on all invoices: (1) the above reference PO Number, (2) the above referenced Vendor ID No., and (3) any other relevant information that will confirm purchase. Failure to comply may delay payment process or cause invoice to be returned.

Line-Sch	Line Description	Class/Item	Quantity	UOM	Unit Price	Extended Amt	Due Date
1- 1	Professional Services	952/59	32.0000	HR	150.00000	4800.00	01/15/2016
						Schedule Total	<input type="text" value="4800.00"/>
						<u>ReqID:</u> 0000014814	
Professional Services for test development.						Item Total for Line # 1	<input type="text" value="4800.00"/>
						Total PO Amount	<input type="text" value="4800.00"/>

All Shipments, Shipping papers, invoices and correspondence must be identified with our Purchase Order Number. Overshipments will not be accepted unless authorized by Buyer prior to Shipment.

Authorized Signature

 01/15/2016



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Terms and Conditions:

The Purchase Order Terms and Conditions can be found at:

<http://www.tdi.texas.gov/general/aspurch.html>

Authorized Signature

Jean Johnson, CFP

01/15/2016