



PURCHASE ORDER

PO Number:303-9-0785

Requisition Number:303-9-01986

Order Date: 6/12/2019

Released

MAIL INVOICE TO AGENCY BELOW

TEXAS FACILITIES COMMISSION
 FISCAL MANAGEMENT / ACCOUNTS PAYABLE
 P.O. BOX 13047 Austin, Texas 78711-3047
 OR
 email to: accountspayable@tfc.state.tx.us

Delivery Location

--Select--

Show numbers on all papers and packages

Referenced Source or Vendor

37217217217083
 University of Texas at Austin
 UT Testing Center
 PO Box 7700
 Austin, TX 78713-7700
 Phone:512-471-0222, Fax:
testingcenter@austin.utexas.edu

CTCM test

Reference attached Testing Registration Form

Description

TFC Contact:
 Pete Aragon
 (512) 463-3209
Pete.Aragon@tfc.state.tx.us

Sec. 771.003. AUTHORITY TO CONTRACT; EXCEPTIONS. (a) A state agency may agree or contract with another state agency for the provision of necessary and authorized services and resources. Exempt Purchase TGC 771 Interagency Agreement.

Line Items

Description	Qty	Unit	Unit Price	Start Date	End Date	Total
Attendee: Pete Aragon	1	ea	\$130.00			\$130.00

Testing and Evaluation Services

CTCM - Certified TX Contract Manager Exam

NIGP Class: 924

NIGP Item: 20

Object Class: 210

Reimbursement Type: Not Reimbursable

Grand Total \$130.00

Questions or concerns regarding this transaction or service should be directed to: Texas Facilities Commission Procurement Division, Phone: (512) 463-0209 or FAX: (512)236-6164 (The mailing address for the Texas Facilities Commission is at the top of this purchase order.)

Agency	TFC
Fiscal Year	2019
Division	Finance
Program	Warehouse Management
Phone	5124633209
Org Code	0467 - Warehouse Management
Type of Purchase/PCC Code	' ' Exempt with Specific Legal Cite
Work Order Number	N/A

ALL TERMS AND CONDITIONS SET FORTH IN OUR BID INVITATION BECOME A PART OF THIS ORDER. VENDOR GUARANTEES MERCHANDISE WILL MEET OR EXCEED SPECIFICATIONS IN THE BID INVITATION.

Invoicing Standards

To facilitate payments from Texas Facilities Commission please follow the invoicing standards set forth below.

The invoice should include, but is not limited to including:

- (1) the vendor's mailing and e-mail (if applicable) address;
- (2) the vendor's telephone number;
- (3) the name and telephone number of a person designated by the vendor to answer questions regarding the invoice;
- (4) the state agency requisition number;
- (5) the state agency's name, agency number, and delivery address;
- (6) the commission's purchase order number, if applicable;
- (7) the contract number or other reference number if applicable;
- (8) a valid Texas Identification Number (TIN) issued by the Comptroller of Public Accounts;
- (9) a description of the goods or services, in sufficient detail to identify the order which relates to the invoice;
- (10) unit numbers corresponding to the original order; and
- (11) other relevant information supporting and explaining the payment requested or identifying a successor organization to an original vendor, if necessary.

FOB DESTINATION CASH DISCOUNT: 0% 0 DAYS.

TEXAS FACILITIES COMMISSION INTERNAL PURCHASING

PURCHASER: _____

Moran, David - CTCD, CTCM, 5124631879

(IN ACCORDANCE WITH YOUR BID, SUPPLIES MUST BE PLACED IN THE AGENCY RECEIVING ROOM IN DAYS FROM RECEIPT OF ORDER.)

STATE AND CITY SALES TAX EXEMPTION CERTIFICATE: The undersigned claims an exemption from taxes under Chapter20, Title 122A, Revised Civil Statutes of Texas, for purchase of tangible personal property described in this number order, purchased from contractor and/or shipper listed above, as this property is being secured for the exclusive use of the State of Texas

[\(Show Terms And Conditions...\)](#)