

ATTENTION: PURCHASING DEPARTMENT

1265 UNION AVENUE MEMPHIS TN 38104

SALES REP: **ALEX GRAY** 

9018735300 FAX #: 9018735301 PHONE NO: METHODIST SHIP TO CODE: 010006 VEND#: 36686

TO:

**MOCK INC** DBA HI SPEED INDUSTRIAL SERVICE 7030 RYBURN DR MILLINGTON TN 38053-6200

\*\*\*\*\* Please Email Confirmation To MLHPurchasing@mlh.org \*\*\*\*\* Purchase order number 4502544953

This number must appear on all Packages, Bill of Lading, Correspondence and Invoice.

Please deliver to:

METHODIST HEALTHCARE - CORPORATE

ATTN: LAUNDRY/LINEN SERVICES

2655 CHELSEA AVENUE MEMPHIS TN 38108

Invoice:

METHODIST HEALTHCARE CORP. OFFICE

ATTN: CORP FINANCIAL SERVICES

1211 UNION AVENUE MEMPHIS TN 38104

We require your acknowledgment with regard to the following items:

**REO.DELIVERY** 

F.O.B.:

FOB DESTINATION

DATE: 07/26/19

DATE: 07/31/2019

SHIP VIA:

LINE ITEM/

QTY.

ACCOUNT NO. ORDERED

**ORDER** 

1

**PACKAGE** UNIT

**DESCRIPTION** CATALOG - #

**UNIT PRICE** 

**EXTENSION** 

001

NO.

98111-6411000

Each

**UNIT** 

INSPECTION AND LOAD TESTING CHAIN

139976

245.67

245.67

\* Tennessee Sales Tax Exempt Number 100118418

\* Receiving Hours 8 A.M. - 3 P.M.

\* Show On Each Container the Complete Purchase Order Number

Attach Itemized Packing List To Outside Of Shipment With Purchase Order Number

P.O. TOTAL:

245.67

SPECIAL INSTRUCTIONS

PAY TERMS: within 30 days Due net METHODIST HEALTHCARE

CONTACT: Bridgette Tinnon - 901-516-2481

PURCHASE ORDER SUBJECT TO STANDARD TERMS & CONDITIONS SEE: www.methodisthealth.org/static/files/1158074830953/postd.pdf

V. P. OF MATERIAL MANAGEMENT **VENDOR COPY**