



Texas Dept of Motor Vehicles
Purchase Order # 60800 0000002191

Payment Terms: NET30 Freight Terms: FOB Destination Ship Via: NA PCC: E Date: 02/03/16 PO Method: DG Dispatch: Dispatch Via Print Rev Dt:

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

Vendor: DISPUTE RESOLUTION CENTER
5407 N IH 35 STE 410
AUSTIN TX 787232445
United States

Ship To: 1P00
4000 Jackson Avenue
Austin TX 78731
United States

Vendor ID: 1742255055

Purchaser: Douglas A Leach
Phone: 512/465-4180
Fax: 512/465-5641
Email: Douglas.Leach@txdmv.gov

Bill To: 4000 Jackson Avenue
Austin TX 78731
United States

Fax:
Email: DMV_FIN-INVOICES@TxDMV.gov

PO Information:

Quantity(ies):

Quantities are estimated: TxDMV does not guarantee to purchase any minimum or maximum quantity. TxDMV reserves the right to increase or decrease the quantity(ies) of the purchase order at the same original terms and conditions. The vendor will be notified in writing by purchase order change notice of any requirements for any increased or decreased quantity(ies).

Change orders will be allowed only if unforeseen conditions arise such as, but not limited to, increasing or decreasing quantities or if the department needs dictate changes. All changes shall be in the scope of original work. No verbal change orders shall be permitted. All change orders must be in writing with a Purchase Order Change Notice (POCN) issued by TxDMV Purchasing Section.

Payment:

Payment will be made in accordance with the Texas Prompt Payment Act, TGC, Subtitle F, Chapter 2251. Vendor shall submit one copy of a correct itemized invoice showing the purchase order number, payee ID., remit to address, and phone number on invoice. Vendors may submit an electronic invoice. All electronic invoices shall be sent to DMV_FIN-INVOICES@txdmv.gov (note: There is an underscore "_" between DMV and FIN). All invoices received at the email address will be filed for future reference and you will receive a receipt confirmation email. To avoid the confusion of duplicate invoices, please do not send other copies of this invoice via regular mail, fax or other means. On emails for electronic invoices, include the company name (as it appears on the invoice) and the purchase order number in the subject line to assist in identifying and processing your invoices in a timely manner. TxDMV will not incur any penalty for late payment if payment is made in 30 days or less from receipt of goods or services and a correct invoice, whichever is later.

Note: warrants will not be issued to a vendor without a current Texas Identification Number.

Agency Contact: Stacey Cullen
(512) 465-4164
Stacey.Cullen@TxDMV.gov

Vendor Contact: Contact@AustinDRC.org
(512) 371-0033

Authorized Signature

02/03/2016



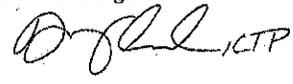
Texas Dept of Motor Vehicles
Purchase Order # 60800 0000002191

Line-Sch	Line Description	Class/Item	Quantity	UOM	Unit Price	Extended Amt	Due Date
1- 1	40 Hour Basic Mediation Training Dispute Resolution Center Feb 10-12 & 17-18, 2016 Attendee: Burnett "Mark" Gladney Texas State Bar Card #: 07991350	924/25	1.0000	EA	950.00000	950.00	02/05/2016
						Schedule Total	950.00
						<u>ReqID:</u>	
						0000002378	
<p>Cancellation will be accepted until two (2) weeks prior to the starting date of each class. There will be a \$50 administration charge deducted from each refund. No refunds are available after the cancellation date.</p>							
						Item Total for Line # 1	950.00

Total PO Amount 950.00

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.

Terms and Conditions:
 Texas Department of Motor Vehicles Standard Terms and Conditions can be found at: <http://www.txdmv.gov/contractors-vendors>

Authorized Signature

02/03/2016

DISPUTE RESOLUTION CENTER

5407 North IH-35, Suite 410, Austin, TX 78723

www.AustinDRC.org | contact@AustinDRC.org

Phone 512-371-0033 | Fax 512-371-7411

Training Name	40-hour Basic Mediation Training
Training Dates	Month February Year 2016
Full Name for your name badge in class (what name you go by)	Burnett "Mark" Gladney
Full Name as you would like it on your Certificate of Completion	Burnett "Mark" Gladney
Mailing Address (Include Business Name if applicable)	4000 Jackson Ave Texas Department of Motor Vehicles
City, State & Zip Code	Austin TX 78731
Cell Phone	- -
Home Phone	- -
Work Phone	512 - 465 - 4156 Ext.
Email	Mark.Gladney@TxDMV.gov
Job Title / Profession	Attorney
Texas State Bar Card #	07991350 Attorneys, the DRC will submit your CLEs to the State Bar
Payment Information	<input type="checkbox"/> Check <input checked="" type="checkbox"/> Purchase Order <input type="checkbox"/> Visa or Mastercard (Information Below) - - - Exp. /
Payment Contact Person if different from above	Name Lisa Selvera Daytime Phone 512 - 465 - 4027 Ext. Email DMV_FIN-INVOICES@txdmv.gov