

Payment Terms: NET30 Freight Terms: FOB Ship Via: NA PCC: E Date: 09/09/16 PO Method: DG Dispatch: Dispatch Rev Dt: Via Print Destination PLEASE NOTE: ADDITIONAL TERMS AND CONDITIONS MAY BE LISTED AT THE END OF THE PURCHASE ORDER. INTERMODAL ASSOCIATION OF NORTH AMERICA 1P00 - TxDMV Warehouse Vendor: Ship To: 11785 BELTSVILLE DR STE 1100 4000 Jackson Avenue CALVERTON MD 207054049 Austin TX 78731 United States United States Bill To: 4000 Jackson Avenue Austin TX 78731 Vendor ID: 1521753485 6 United States Purchaser: Rhonda Lee Gips 512/465-4199 Phone: 512/465-5641 Fax: Fax: Rhonda.Gips@txdmv.gov **Email: Email:** DMV_FIN-INVOICES@TxDMV.gov

PO Information:

Change Orders:

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.

TxDMV Contact: Tammy Gomez - 512-465-3767 or Tammy.Gomez@TxDMV.gov

Vendor Contact: 301-982-3400 ext.332 or registration@intermodal.org

Authorized Signature	
Rhonda Kips, crpm	

<u>09/09/2016</u>



Line-Sch	Line Description	Class/Item	Quantity	UOM	Unit Price	Extended Amt	Due Date
1-1	IANA Intermodal Expo 2016 George R. Brown Convention Center Houston, TX Sept. 18-20, 2016 Attendee: Tammy Gomez	924/25	1.0000	EA	\$225.00	\$225.00 Schedule Total	09/13/2016 \$225.00
				<u>Req</u> 0000	<u>ID:</u> 0003525		
Cancellation Policy: Advance commitments will preclude refunds for cancellations received after August 12, 2016. Refunds will be processed for cancellations received in writing through August 12, 2016, less a \$150 administration fee.							
					Item	Total for Line # 1	\$225.00
						Total PO Amount	\$225.00
	ents, Shipping papers, invoices and orized by Purchaser prior to Ship		ce must be identif	ied with our P	urchase Order N	umber. Over shipments w	vill not be accepted

Authorized Signature	
Rhonde Kips, crpm	

Registration Form

September 18-20, 2016 George R. Brown Convention Center | Houston, Texas



September 18-20 Houston, TX

FREE

Expedite your registration and confirmation by registering online at www.IntermodalEXPO.com

REGISTRATION FEES		Early Rate through July 1	Standard Rate after July 1	Rate Selected
FULL REGISTRATION - includes access to all EXPO events		•		
	Member	\$675	\$825	
	Additional Member	\$625	\$775	
	Non-Member*	\$1,025	\$1,230	
	Government	\$225	\$225	225

□ FREE TRADESHOW ONLY PASS — access the tradeshow floor for free the afternoon of Tuesday, September 20th!

TOURS

Information regarding tours at this year's EXPO will be announced shortly. Full EXPO registration, your EXPO badge, and a government issued ID are required.

REGISTRANT INFORMATION ALL INFORMATION IS REQUIRED

lammy

🗆 Mr. 🗆 Ms. 🖬 Mrs.

First Name

Last Name

Gomez

Nick Name for badge if different than first name

Title C	smmerc	ial Fle	et A	ccount	Manag	ement
					lehicle	
	4000	•				

Address (cont.)

City/State/Zip

Phone 5

Email tammy.gomez@txdmv.gov

Austin, TX 78731

2-465-3767

PAYMENT

Please Note: If you are not eligible for the registration rate that you selected, IANA reserves the right to charge the correct amount to your credit card.

Payments must be made by check or credit card (no exceptions). Make checks payable, in U.S. funds and drawn on a U.S.-based bank, to Intermodal Association of North America at: 11785 Beltsville Drive, Suite 1100, Calverton, MD 20705-4048.

Completed forms with credit card payments may be returned to registration@intermodal.org or faxed to 301-982-4815. Questions? Call 301-982-3400, ext. 332.

□ Check Enclosed □ American Express □ MasterCard □ Visa Card #

Expiration Date

Name on Card

Signature

I DO NOT wish to include my email address in the attendee list

CANCELLATION POLICY

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