Texas Department of Motor Vehicles
Business Unit # 60800
Purchase Order # 0000003345

Payment Terms: **NET30** Freight Terms: **FOB Destination** Ship Via: **NA** PCC: **0** Date: **11/28/16** PO Method: **IA** Dispatch: **Dispatch Via Print** Rev Dt:

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

Vendor: UNIVERSITY OF TEXAS AT AUSTIN
PROFESSIONAL DEVELOPMENT CENTER
PO BOX 7518
AUSTIN TX 787137518
United States

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

Bill To: 4000 Jackson Avenue
Austin TX 78731
United States

Vendor ID: 3721721721 7

Purchaser: Rhonda Lee Gips
Phone: 512/465-4199
Fax: 512/465-5641
Email: Rhonda.Gips@txdmv.gov

Fax:
Email: DMV_FIN-INVOICES@TxDMV.gov

PO Information:

Interagency Agreement Contract Act: Texas Government Code, Title 7, Chapter 771
.
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.
.
Texas Department of Motor Vehicles Standard Terms and Conditions can be found at: http://www.txdmv.gov/contractors-vendors
.
Student Withdrawal, Transfer, Refund Policy, and Fees:
Several options are available if a student needs to withdraw from a class. The options depend on when the withdrawal request is made. Nonattendance does not constitute a withdrawal. Official withdrawal procedures must be followed. All withdrawal requests must be received, Monday-Friday, during normal business hours.

Please Note: Registration fees for workshops, exam prep courses, and online courses are non-refundable. Qualified withdrawals/transfers must be submitted via the student portal or may be submitted using the Course Transfer Form. The form may be submitted via email, fax, or mail. The request must be received at least three (3) full business days before the start of a workshop or exam prep course and two (2) full weeks prior to the start of a certificate program. You will have the option to request a credit on file, transfer, or list a substitute. No fees assessed for same day substitutions.

Please Note: A workshop, exam prep, certificate program or online course transfer or credit on file will result in an administrative charge. This fee must be paid at the time of the request.

TxDMV Contact:
Monica Hernandez - 512-465-1261 or Monica Hernandez@TxDMV.gov

Vendor Contact:

Authorized Signature

Rhonda Gips, CTPM

11/28/2016

Texas Department of Motor Vehicles
Business Unit # 60800
Purchase Order # 0000003345

512-471-2924 or cpe-programs@austin.utexas.edu

Line-Sch	Line Description	Class/Item	Quantity	UOM	Unit Price	Extended Amt	Due Date
1- 1	Grammar & Punctuation for Business Communication - COM-1006-006 Joe C. Thompson Conf. Cnt rm 3.108 Dec. 13, 2016 8:30 am - 4:30 pm Attendees: Yvette Rendon - rend3301 Syamala (Sam) Mallela - sm66879 Jennifer Wagner - jrw4796 Katrice Gil - kg28977	924/25	4.0000	EA	$391.50	$1,566.00	12/13/2016

Schedule Total $1,566.00

ReqID:
0000003866

Full course fee $435.00 per student
3 or more students qualifies for a 10% discount
Discount course fee $391.50 per student

Item Total for Line # 1 $1,566.00

Total PO Amount $1,566.00

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

Authorized Signature

Rhonda Yupe, CTPM

11/28/2016

The University of Texas at Austin
Center for Professional Education

Extended Campus
REGISTRATION FORM

Please complete each section of this form.

HOW TO REGISTER

1. Online Registration: **Preferred Method** www.professionaled.utexas.edu
2. By Fax: 512-232-6126
3. In person: See Physical Address below
4. By Mail: Fill out Registration Form and mail with payment to:

Center for Professional Education
The University of Texas at Austin
PO Box 7518
Austin, TX 78713-7518

HOW DO I GET A UT EID?

Everyone doing business with the University must acquire a UT EID. For more information and to get a UT EID please visit www.utexas.edu/eid/

COMPANIES/ORGANIZATIONS

Credit card payment, check, or a purchase order must accompany the registration form. Purchase Orders must include:

- Company billing information.
- Contact name, title and phone number of person authorized to purchase for business/organization.
- What is being authorized; i.e., tuition, books, etc.
- Student(s) name(s), UT EID, course number(s) and dates of class (es).

Enrollment is on a first-come basis. If a course fills or cancels, we will notify the organization or student by email. Tuition will be refunded according to our refund policy guidelines.

DEBIT CREDIT CARDS

Purchases made with Debit Visa and MasterCard may have a daily charge limit. Please contact your financial institution prior to making any large purchases. Declined cards may be subject to a $25 processing fee.

PROMISSORY NOTE

The CPE offers a payment plan option for most cohort style Certificate Programs.

For more information on using a Promissory Note as a payment option please contact the Program Coordinator.

CPE MAIN OFFICE

Center for Professional Education
The University of Texas at Austin
2901 North IH 35, 3rd Floor
Austin, TX 78722
Phone: (512) 471-4633 or (800) 687-7345

PERSONAL INFORMATION

FIRST NAME	LAST NAME	UT EID (REQUIRED)	PHONE #
Yvette	Rendon	rend3301	512-465-4170

ADDRESS	CITY/STATE	ZIP	E-MAIL ADDRESS
4000 Jackson Ave	Austin, TX	78731	Yvette.Rendon@TxDMV.gov

STUDENT IS ELIGIBLE FOR THE FOLLOWING FUNDING SOURCE: ○ **VA GI Bill** ○ **MYCAA** ○ **TX WORKFORCE** ○ **Other:** _____

PREFERRED ADDRESS: (If different from above)
○ HOME ○ BUSINESS

STREET ADDRESS _____ APT# _____
CITY _____
STATE _____ ZIP _____
HOME PHONE _____ CELL PHONE _____

HOW DID YOU HEAR ABOUT THIS COURSE?
○ BILLBOARD ○ BROCHURE ○ CPE WEBSITE ○ CONFERENCE/BOOTH ○ EMAIL ○ FRIEND/COLLEAGUE
○ FLYER ○ RADIO ○ SEARCH ENGINE ○ WEBSITE ○ OTHER: _____

COURSE INFORMATION

COURSE TITLE	SECTION #
Grammar & Punctuation for Business Comm.	COM-1006-006

COURSE LOCATION	START / END DATE
UT Austin	12/13/16

COURSE FEE: $391.50

COURSE TITLE	SECTION #

COURSE LOCATION	START / END DATE

COURSE FEE

POLICY AGREEMENT

Notification of withdrawals/transfers must be received in writing using the Course Transfer Form. The form may be submitted via e-mail, fax, or mail. The request must be received at least **three full business days** before the start of a workshop or exam prep course and two weeks prior to the start of a certificate program. You will have the option to request a credit on file, transfer or list a substitute. No fees assessed for same day substitutions. By signing below, I acknowledge I have read the refund policy found on the CPE website. I am aware of specific course fees and requirements and I agree to abide by the terms stated:

Rhonda Lipps _____ 11-22-16
SIGNATURE (REQUIRED)

PAYMENT METHOD

CREDIT CARD # _____
○ VISA ○ MASTERCARD ○ DISCOVER ○ AMEX
EXPIRATION DATE _____ 3-DIGIT CVV _____
NAME AS IT APPEARS ON THE CREDIT CARD (PLEASE PRINT) _____

○ PLEASE CHARGE TO UT ACCOUNT (IDT)
UT ACCOUNT # _____
NAME OF UT ACCOUNT TO IDT _____
UT DEPARTMENT _____ MAIL CODE _____

○ CHECK # _____
Please make checks payable to: **UNIVERSITY OF TEXAS AT AUSTIN**

SIGNATURE (REQUIRED FOR ANY PAYMENT ABOVE) _____ DATE _____

THIRD PARTY BILLING INFORMATION

Purchase order must accompany registration form.
For faster processing please fax a copy of the purchase order to 512-232-6126 or email cpe@austin.utexas.edu.

NAME OF BILLING CONTACT	PHONE	FAX	COMPANY
Lisa Selvera	512-465-4027		TxDMV

ADDRESS OF BILLING CONTACT	EMAIL ADDRESS
4000 Jackson Ave, Austin, TX 78731	DMV_FIN-INVOICES@TxDMV.gov

The University of Texas at Austin
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REGISTRATION FORM

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CPE MAIN OFFICE

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The University of Texas at Austin
2901 North IH 35, 3rd Floor
Austin, TX 78722
Phone: (512) 471-4633 or (800) 687-7345

PERSONAL INFORMATION

FIRST NAME	LAST NAME	UT EID (REQUIRED)	PHONE #
Syamala (Sam)	Mallela	sm66879	512-465-1444

ADDRESS	CITY/STATE	ZIP	E-MAIL ADDRESS
4000 Jackson Ave	Austin, TX	78731	Syamala.Mallela@TxDMV.gov

STUDENT IS ELIGIBLE FOR THE FOLLOWING FUNDING SOURCE: ○ **VA GI Bill** ○ **MYCAA** ○ **TX WORKFORCE** ○ **Other:** _____

PREFERRED ADDRESS: (If different from above)

○ HOME ○ BUSINESS

STREET ADDRESS _____ APT# _____
CITY _____
STATE _____ ZIP _____
HOME PHONE _____ CELL PHONE _____

HOW DID YOU HEAR ABOUT THIS COURSE?

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COURSE INFORMATION

COURSE TITLE	SECTION #
Grammar & Punctuation for Business Comm.	COM-1006-006
COURSE LOCATION	**START / END DATE**
UT Austin	12/13/16
COURSE FEE	
$391.50	

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UT ACCOUNT # _____
NAME OF UT ACCOUNT TO IDT _____
UT DEPARTMENT _____ MAIL CODE _____

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NAME OF BILLING CONTACT	PHONE	FAX	COMPANY
Lisa Selvera	512-465-4027		TxDMV

ADDRESS OF BILLING CONTACT	EMAIL ADDRESS
4000 Jackson Ave, Austin, TX 78731	DMV_FIN-INVOICES@TxDMV.gov

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Phone: (512) 471-4633 or (800) 687-7345

PERSONAL INFORMATION

FIRST NAME	LAST NAME	UT EID (REQUIRED)	PHONE #
Jennifer	Wagner	jrw4796	512-465-5828

ADDRESS	CITY/STATE	ZIP	E-MAIL ADDRESS
4000 Jackson Ave	Austin, TX	78731	Jennifer.Wagner@TxDMV.gov

STUDENT IS ELIGIBLE FOR THE FOLLOWING FUNDING SOURCE: ○ VA GI Bill ○ MYCAA ○ TX WORKFORCE ○ Other: _____

PREFERRED ADDRESS: (If different from above)

○ HOME ○ BUSINESS

STREET ADDRESS _____ APT# _____
CITY _____
STATE _____ ZIP _____
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HOW DID YOU HEAR ABOUT THIS COURSE?

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COURSE FEE	
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The University of Texas at Austin
2901 North IH 35, 3rd Floor
Austin, TX 78722
Phone: (512) 471-4633 or (800) 687-7345

PERSONAL INFORMATION

FIRST NAME	LAST NAME	UT EID (REQUIRED)	PHONE #
Katrice	Gil	kg28977	512-465-4173

ADDRESS	CITY/STATE	ZIP	E-MAIL ADDRESS
4000 Jackson Ave	Austin, TX	78731	Katrice.Gil@TxDMV.gov

STUDENT IS ELIGIBLE FOR THE FOLLOWING FUNDING SOURCE: ○ VA GI Bill ○ MYCAA ○ TX WORKFORCE ○ Other: _____

PREFERRED ADDRESS: (If different from above)

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STREET ADDRESS _____ APT# _____
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COURSE LOCATION	**START / END DATE**	**COURSE LOCATION**	**START / END DATE**
UT Austin	12/13/16		
COURSE FEE		**COURSE FEE**	
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Rhonda Gips — SIGNATURE (REQUIRED)
11/28/16 — DATE

PAYMENT METHOD

CREDIT CARD # _____
○ VISA ○ MASTERCARD ○ DISCOVER ○ AMEX
EXPIRATION DATE _____ 3-DIGIT CVV _____
NAME AS IT APPEARS ON THE CREDIT CARD (PLEASE PRINT) _____

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○ CHECK # _____
Please make checks payable to: **UNIVERSITY OF TEXAS AT AUSTIN**

SIGNATURE (REQUIRED FOR ANY PAYMENT ABOVE) _____ DATE _____

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NAME OF BILLING CONTACT	PHONE	FAX	COMPANY
Lisa Selvera	512-465-4027		TxDMV

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