

**Stephen F. Austin State University**

Procurement and Property Services

Nacogdoches, Texas 75962-3030

Phone (936) 468-2206 * Fax (936) 468-4282

PO Number: **B2200423**PO Date: **10/25/21**

Delivery Date:

Supplier:Arthur J. Gallagher Risk Management Ser
12750 Merit Dr Ste 1000
Dallas TX 75251-1200**CONFIRM RECEIPT OF PURCHASE ORDER AND
ACCEPTANCE OF DELIVERY DATE
BY EMAILING PURCHASE@SFASU.EDU.**

fountaincw@sfasu.edu

Send Billing Invoice to:Stephen F. Austin State University
P.O. Box 6085
Nacogdoches, TX 75962-6085
ATTN: Accounts Payable**Ship to:**Env Health-Safety-Risk Mgmt
Safety Office
430 E Austin
SFA Box 6113
Nacogdoches TX 75962**Terms: Net 30****FOB: Not Applicable****PURCHASE ORDER NO. MUST APPEAR ON ALL
SHIPPING DOCUMENTS AND INVOICES**

Item	Description	Quantity	Unit Cost	Total Cost
1	Crime Insurance Proposal, dated 10/06/2021 Policy Period: 09/01/2021 to 09/01/2024 Carrier: Allmerica Financial Benefit Insurance Co In accordance with iContracts #231081 ---- Insurance broker service provided in accordance with University of Houston RFP #783-20007 UHS Risk Management Consulting and Insurance Broker Services, Client Services Agreement and Exhibit A, and iContracts #947625. ---- 000P95306A INSURANCE	1.00 YRS	5,267.0000	5,267.00

Purchaser: Carol Fountain

(936) 4686495

ADDITIONAL CHARGE:Vendor ID: **20004645**

Collegiate Licensed:

DISCOUNT/TRADE-IN:

Req No:

Employee/Employee Relationship:

TOTAL:**CONTINUED**Blanket Order: **B2200423**

HUB Status:

Purchase Class: **Other State Agency Contracts**

Vendor Warrant Hold process runs nightly and terminates any vendors on hold. Vendor EPLS status verified by Purchaser.

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Item	Description	Quantity	Unit Cost	Total Cost
2	Crime Insurance ---- Coverage period: 09/01/2021 - 09/01/2022 000P95306A INSURANCE	1.00 YRS	5,267.0000	5,267.00
3	Crime Insurance ---- Coverage period: 09/01/2022 - 09/01/2023 000P95306A INSURANCE	1.00 YRS	5,282.0000	5,282.00
	Crime Insurance			

Purchaser: Carol Fountain

(936) 4686495

ADDITIONAL CHARGE:Vendor ID: **20004645**

Collegiate Licensed:

DISCOUNT/TRADE-IN:

Req No:

Employee/Employee Relationship:

TOTAL:**CONTINUED**Blanket Order: **B2200423**

HUB Status:

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Item	Description	Quantity	Unit Cost	Total Cost
	---- Coverage period: 09/01/2023 - 09/01/2024			

Purchaser: Carol Fountain (936) 4686495
Vendor ID: **20004645** Collegiate Licensed:
Req No: Employee/Employee Relationship:
Blanket Order: **B2200423**
HUB Status: Purchase Class: **Other State Agency Contracts**

ADDITIONAL CHARGE:	.00
DISCOUNT/TRADE-IN:	.00
TOTAL:	15,816.00

Vendor Warrant Hold process runs nightly and terminates any vendors on hold. Vendor EPLS status verified by Purchaser.