Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Ter Net 30	ms Freight Terms No Shipment Involved	Ship Via NO SHIP	Purchase Order	НН	STX-3-0000283299
If advertised by informal bid, Invitation for Offer, or Request for Proposal; all specifications, terms, and conditions set forth in the advertisement and vendor's			Date 09/01/22	Revision	Page 1
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.		Ship To:	4038 - Corpus Christi:902 Airport HEALTH & HUMAN SERVICES COMMISSION 902 Airport Rd Corpus Christi TX 78405 United States		
Vendor:	1742784568 4 SOUTH TEXAS RETINA CONSULTA 5540 SARATOGA BLVD STE 200 CORPUS CHRISTI TX 784132953	NTS LLP	Bill To:	Invoice - DADS HEALTH & HUMAN 4001 Highway 36 South Brenham TX 77833	SERVICES COMMISSION h

Fax: 979/277-1865

712Accounting@hhs.texas.gov **Email:**

United States

Mckelvy, Michael **Purchaser:**

Line-Sch **Inventory Item ID - Line Description** Class/Item **UOM** PO Price Quantity **Extended Amt Due Date**

FY23 funding EX/0 Legal Cite 2155.144 Client Purchase PO must not exceed \$10,000.00 Requisition 0000185508

United States

Rates: Current Medicaid/Medicare approved rates and/or negotiated rates per individual basis.

PO Service Dates 09-01-2022 to 08-31-2023

Services to be performed: Ophthalmologist Services

Attached Terms and Conditions apply to this Purchase Order.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2023 are automatically canceled.

Vendor Contact 1742784568 South Texas Retina Consultants Jessica 361-993-8510 ext 127 Jessaenze@aol.com

Agency contact Christine Cruz 361-888-5301 Ext: 7507 Christine.Cruz@hhs.Texas.gov **CCSSLC**

PCS contact Mike McKelvy; CTCD, CTCM 512-406-2579 Mike.McKelvy@hhs.Texas.gov

1-1 948-74 1.00 LOT 5000.00000 \$5,000.00 09/01/2022

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			Fax: Email:	979/277-1865 712Accounting	g@hhs.texas.gov	
			Purchaser:	Mckelvy,Mich	ael	
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt Due Date	
			Sche	edule Total	\$5,000.00	
			Item Total	for Line 1	\$5,000.00	

No substitutions or cancellations are permitted without prior approval by Health & Human Services Commission. If contractor fails to deliver by promised delivery date (or reasonable time thereafter) or fails to meet requirements, Health & Human Services Commission reserves the right to purchase elsewhere and charge an increased cost and handling to contractor.

Over shipments will not be accepted unless authorized by Buyer prior to shipment. The dispute resolution process provided for in Chapter 2260 of the Texas Government Code must be used by the Health & Human Services Commission and Contractor to attempt to resolve all disputes arising under the contract.

Performance under this purchase order is acceptance of the attached affirmations and terms and conditions.

Authorized By 03/11/2022

\$5,000.00

Total PO Amount