

# Department of State Health Services

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000285159</b>
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 conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.			<b>Date</b> 09/01/22
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> Page 1
			<b>Ship To:</b> 4546 - Austin:1100 W 49th St (DBGL) DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DBGL) PO Box 149347 Austin TX 78756 United States

**Vendor:** 1860748363 5  
MOBILE MINI I INC  
PO BOX 650882  
DALLAS TX 75265-0882  
United States

**Bill To:** Invoice-DSHS Fiscal Claims  
DEPARTMENT OF STATE HEALTH SERVICES  
1100 W 49th St (RBB)  
PO Box 149347  
Austin TX 78756  
United States

**Fax:** 512/458-7442  
**Email:** invoices@dshs.texas.gov

**Purchaser:** Mullan,Susan

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY23 funding  
SP/E  
Requisition 185696 Pricing per Quote 0001817068

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

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  
Mobile Mini, Inc.  
(800) 950-6464 Ext #: 7752  
xelejalde@mobilemini.com

Agency contact  
JOHN HOLCOMB  
512/776-2475  
John.Holcomb@dshs.texas.gov

PCS contact  
Susan Mullan  
512-406-2575  
susan.mullan@hhs.texas.gov

1-1	25' X 10' PREMIUM DOOR CONTAINERS, RENTAL SERVICE PREMIUM DOORS ON BOTH ENDS EACH PER MONTH FROM 9-1-2022 - 8-31-2023	917-90	14.00	EA	240.00000	\$3,360.00	09/01/2022
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**Schedule Total**                     \$3,360.00

**Item Total for Line 1**                     \$3,360.00

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<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> Page 2
			<b>Ship To:</b> 4546 - Austin:1100 W 49th St (DBGL) DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DBGL) PO Box 149347 Austin TX 78756 United States

**Vendor:** 1860748363 5  
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**Purchaser:** Mullan,Susan

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
2-1	PPE 2 EACH @\$5.04 X 14 TERMS	917-90	14.00	EA	10.08000	\$141.12	09/01/2022
<b>Schedule Total</b>						<u>\$141.12</u>	
<b>Item Total for Line 2</b>						<u>\$141.12</u>	
<b>Total PO Amount</b>						<span style="border: 1px solid black; padding: 2px;">\$3,501.12</span>	

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.

<b>Authorized By</b> 	<b>04/05/2022</b>
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