Health and Human Services Commission

Purchase Order

					Dispatch via Print	
Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	ł	HSTX-3-0000285261	
specification	by informal bid, Invitation for Offer, or Re s, terms, and conditions set forth in the adv	ertisement 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:	Ship To:2203 - Big Spring:1901 N Highway 8 HEALTH & HUMAN SERVICES CO 1901 N Highway 87 Big Spring TX 79720 United States		
Vendor:	1752834737 4 A-TEX RESTAURANT SUPPLY INC 2008 S BRYANT BLVD SAN ANGELO TX 769038712 United States	2	Bill To:	Invoice - DADS HEALTH & HUM. 2501 Maple St PO Box 451 Abilene TX 79602 United States	AN SERVICES COMMISSION	
			Fax: Email:	325/795-3807 710Accounting@hl	hsc.state.tx.us	
			Purchaser:	Mcfadden,Danny		
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt Due Date	

FY23 funding SP/E 936/67 Requisition 192086 PO Service Dates 09/01/22 to 08/31/2023

FY23 products and/or services to be shipped and invoiced after 9/1/22.

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 Name: A-Tex Restaurant Supply Vendor ID: 1752834737 4 Vendor address: 2008 S Bryant Blvd San Angelo, TX 76903 Vendor Contact: Manuel Bermudez Vendor Phone: (325)224-8888 Vendor Email: Manuel@atexrestaurantsupply.com

Program SME Name: Elena Paiz Program SME Email: elena.paiz@hhs.texas.gov Program SME Phone: 432-268-7813 Facility: Big Spring State Hospital

Contract Manager Name: Donna Lee, CTCM Contract Manager Email: donna.lee@hhs.texas.gov Contract Manager Phone: 432-268-7975

PCS Purchasing Contact: Danny McFadden Phone: 512-406-2671 Email: danny.mcfadden@hhs.texas.gov

PCS Email PO to: elena.paiz@hhs.texas.gov (Food Service) donna.lee@hhs.texas.gov (Facility Contract Specialist-CTCM)

VENDORS SEND INVOICES VIA EMAIL TO 710Accounting@hhsc.state.tx.us

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					Purchaser:	Mcfadden,Danny		12/406-2671
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ttn: Accounti O Box 451 bilene, TX 7 :ODE # 4507 mail: 710acc	7 counting@hhsc.	state.tx.us			nairs for the Rig Sori	ng State Hospital fra	nm 9/1/22 to 8/24/	23 As needed
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				Purchaser:	Mcfadden,Danny	512/406-2671
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt Due Date

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	
Damy and fallows CTCD, et CM	<u>04/05/2022</u>