

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000286764
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.			Date 09/01/22
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 1726 - Houston:5425 Polk St HEALTH & HUMAN SERVICES COMMISSION 5425 Polk St PO Box 16017 Ste 250 Houston TX 77023 United States
			Page 1

Vendor: 1751223528 8
WASTE MANAGEMENT OF TEXAS INC
FORT WORTH HAULING
PO BOX 660345
DALLAS TX 752660345
United States

Bill To: Invoice-HHSC Financial Service
HEALTH & HUMAN SERVICES COMMISSION
5425 Polk St
PO Box 16017
Ste 220
Houston TX 77023
United States

Fax: 713/767-2488
Email: Reg_06_Regional_Budget_PRF@hhsc.state.tx

Purchaser: Munoz, Gi bert J

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 193517 - Pricing per Quote S0015644020
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
First and Last Name - Patricia Reimers
Phone number - (800) 772-2653
Email address -

Agency contact
First and Last Name - Shekima Fleary
Phone number - (713) 767-2423
Email address - Shekima.Fleary@hhs.texas.gov

PCS contact
First and Last Name - Gi bert Munoz
Phone number - (512) 406-2473
Email address - Gilbert.Munoz@hhs.texas.gov

1-1	R06_FY23 TPO As Needed Trash Pick-Up / Dumpster Services for Region 06	975-37	1.00	LOT	3500.00000	\$3,500.00	09/01/2022
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Schedule Total	\$3,500.00
Item Total for Line 1	\$3,500.00
Total PO Amount	\$3,500.00

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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

Michelle Murray, CTCB

04/25/2022