## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Pay	ment Terms	Freight Terms	Ship Via			
Net	30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-2-0000	288196
spec	cifications, terms, an	d conditions set forth in the	or Request for Proposal; all e advertisement and vendor's	<b>Date</b> 05/10/22	Revision	Page 1
guai	0 1		red purchase order. Contractor eed numbered purchase order	Ship To:	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMI 1111 W North Loop	ISSION
	shipments, shipping n our Purchase Ord	3 <b>.</b>	rrespondence must be identified		Austin TX 78756 United States	
Ven	dor: 174197	76051 1		Bill To:	Invoice-HHSC Accounting	

WORKOUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703

**United States** 

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/424-6901

HHSC\_AP@hhsc.state.tx.us **Email:** 

Mcmurtray, Nicole **Purchaser:** 

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

Procurement Type: EX/0

Requisition #:0000197672

INVOICING - See above for Bill to Information

See above for SHIP TO ADDRESS ON PO

Agency Delivery Contact: Name: Angel Rivera Phone #: +1 (512) 438-3512 Email: Angel.Rivera@hhs.texas.gov

Purchaser Information: Name: Nikki McMurtray Phone #512-776-6190

Email Address: Nikki.McMurtray@hhs.texas.gov

**VENDOR INFORMATION:** Vendor Name: WorkQuest, Inc. Contact: Customerservices Phone #: 512-451-8145

Email: smartbuy@workquest.com

Freight Terms are FOB Destination Prepaid and Allowed/Add

Terms: Net 30

INTERAGENCY COOPERATION ACT TGC Chapter 771

1-1 486-13 1.00 C12 66.44000 \$66.44 05/26/2022

Hand Sanitizer, Instant, Purell, Green Seal, 12 Oz. Pump Bot Supplier Part Number: 48613502

Schedule Total	\$66.44
Item Total for Line 1	\$66.44

## **Health and Human Services Commission**

## **Purchase Order**

Dispatch via Print

Payment Te		Ship V				UUCTV 2 0000200406	
Net 30	Prepaid & Allow	BEST		Purchase Order		HHSTX-2-0000288196	
	by informal bid, Invitation for Offer, or Rec		Date	Revision Pag			
	ns, terms, and conditions set forth in the adve		05/10/22				
	goods or services delivered meet or exceed no			Ship To:	6694 - Austin:1111 W North Loop		
requirements		umbered puremas	-	HEALTH & HUMAN SERVICES COMMISSION			
	nts, shipping papers, invoices, and corresp	ondence must b		1111 W North Loop			
	irchase Order Number.			Austin TX 78756 United States			
					Office States		
Vendor:	1741976051 1			Bill To:	Invoice-HHSC Accounting		
	WORKQUEST			HEALTH & HUMAN SERVICES COMMISSION			
	1011 E 53RD 1/2 ST				4601 W Guadalı	upe St	
	AUSTIN TX 787511703 United States			Austin TX 78751 United States			
			Fax:	= <del></del>			
				Email:	HHSC_AP@hhsc.state.tx.us		
				Purchaser:	Mcmurtray,Nic	ole	
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

MIXKL, McMuntray, CTCD

Total PO Amount

05/10/2022

\$66.44