Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Te Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order		HHSTX-2-0000290295	
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 06/06/22	Revision	Page 1	
guarantees g requirements All shipmen	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: 6563 - Abilene:2501 Maple St HEALTH & HUMAN SERVICES COM 2501 Maple St 2501 Maple St Abilene TX 79602 United States		
Vendor:	1952295473 4 MXR IMAGING INC 4909 MURPHY CANYON RD STE SAN DIEGO CA 921234300 United States	120	Bill To:	Invoice - DADS HEALTH & HUM 2501 Maple St PO Box 451 Abilene TX 79602 United States	MAN SERVICES COMMISSION	

Line-SchInventory Item ID - Line DescriptionClass/ItemQuantityUOMPO PriceExtended AmtDue Date

Fax:

Email:

325/795-3807

710Accounting@hhsc.state.tx.us

FREIGHT: F.O.B Destination Freight Prepaid and Allowed

DELIVERY:4weeks After Receipt of PO

QUOTE # MXR 20066025

Sent invoices to : 710 accounting @hhsc.state.tx.us

AGENCY DELIVERY CONTACT: Heather Barlow 325-795-3444

heather.barlow@hhs.texas.gov

Andrea Spinks (325)795-3293

blake.riggins@hhs.texas.gov andrea.spinks@hhs.texas.gov

HHSC BUYER:

Courtney Meads CTCD, CTCM 512-406-2478 courtney.meads@hhs.texas.gov

VENDOR:

Kimberly Mitchell, ARRT (R) (M) Account Executive - N/NE Texas

Mobile: 214-202-6338

Kim.Mitchell@MXRImaging.com

PREMIER GPO and DSHS Contract # HHS000722100001

PURCHASING METHOD: EX/0

Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

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Yendor: 1952295473 4 MXR IMAGING INC 4909 MURPHY CANYON RD STE 120 SAN DIEGO CA 921234300 United States	MXR IMAGING INC 4909 MURPHY CANYON RD STE 120 SAN DIEGO CA 921234300			Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 2501 Maple St PO Box 451 Abilene TX 79602 United States			
		Fax: Email:	325/795-3807 710Accounting@hhsc.state.tx.us				
ine-Sch Inventory Item ID - Line Description Class/Item	n Quantity	Purchaser:	Meads,Courtney PO Price	5: Extended Amt	12/406-2478 Due Date		
lot to Exceed \$50,000.00							
REQUIREMENTS/LIMITATIONS:							
his PO is contingent upon the continued availability of lawful a	appropriations by	the Texas Legisla	ture. FY2023				
Requisition 198298							
-1 898-35 X-RAY EQIPMENT - UPGRADE OF CURRENT SYSTEM	1.00	EA	32230.67000	\$32,230.67	07/11/2022		
		Se	chedule Total	\$32,230.67			
		Item Tot	al for Line 1	\$32,230.67			

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.

Authori	ized By			
Cautry	Meach	CTCD, CTCM	06/06/2022	