

# Health and Human Services Commission

## 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 style="font-size: 1.2em;">HHSTX-3-0000290858</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>  <b>Page</b> 1
			<b>Ship To:</b> 6065 - Pollok:6844 N US Hwy 69 HEALTH & HUMAN SERVICES COMMISSION 6844 N US Hwy 69 PO Drawer 1648 Pollok TX 75969 United States

**Vendor:** 1300688582 9  
ACADIAN AMBULANCE SERVICE INC  
PO BOX 98000  
LAFAYETTE LA 705098000  
**United States**

**Bill To:** Invoice - DADS  
HEALTH & HUMAN SERVICES COMMISSION  
424 Mesquite Dr  
PO Box 1132  
Mexia TX 76667  
United States

**Fax:** 254/562-1894  
**Email:** 718Accounting@hhs.texas.gov

**Purchaser:** Payne,Bruce

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  
PO must not exceed \$10,000.00  
Requisition 190253  
PO Service Dates 09/01/2022 to 08/31/2023

Attached Terms and Conditions apply to this Purchase Order.

Goods and/or services are to be delivered and invoiced after September 1, 2022.

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 or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods actually ordered and received by the agency. Any funds not utilized by 08/31/2023 are automatically canceled.

Vendor VID: 1300688582 9  
Acadian Ambulance Service Inc  
PO Box 98000  
Lafayette, LA 70509-8000

Vendor Contact: James Mercer  
Phone: 281.995.8030  
Email: james.mercer@acadian.com

Lead Contact: Mary Shumaker  
Email: mary.shumaker@hhs.texas.gov  
Phone: 936.853.8263

Contract Manager: Jennifer Davis  
Email: Jennifer.davis@hhs.texas.gov  
Phone: 254.562.1040  
Cell: [REDACTED]

PCS contact:  
Bruce Payne CTCD, CTCM  
512-406-2515  
bruce.payne@hhs.texas.gov

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FY23 (Service) Ambulance service for transporting individuals to and from medical appointments

**Schedule Total**                     \$5,000.00

**Item Total for Line 1**                     \$5,000.00

**Total PO Amount**                     \$5,000.00

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**

*Bruce Payne, CTPM, CTCM*

**06/13/2022**