### **Health and Human Services Commission**

### **Purchase Order**

**Dispatch via Print** 

432/263-9617

**Due Date** 

**Extended Amt** 

Atchley, Cindy Jean

PO Price

Payment Term Net 30	s Freight Terms N/A, Service, Pick up, etc.	<b>Ship Via</b> NONE	Purchase Order	HHSTX-3-0000	294400	
specifications, t	informal bid, Invitation for Offer, or Requererms, and conditions set forth in the advertise	sement and vendor's	<b>Date</b> 09/01/22	Revision	Page 1	
guarantees good requirements.  All shipments,	ponses become a part of this numbered purcils or services delivered meet or exceed num- shipping papers, invoices, and corresponnase Order Number.	bered purchase order	Ship To:	6433 - Carlsbad:11640 US Hwy 87 N HEALTH & HUMAN SERVICES COMM 11640 US Hwy 87 N 11640 N US Hwy 87 Carlsbad TX 76934 United States	IISSION	
P 8 S	1752852318 0 PIONEER GROUP INC 8009 US HIGHWAY 87 N SAN ANGELO TX 769016270 United States		Bill To:	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		

Quantity

Class/Item

Purchaser:

**UOM** 

FY23 Funding EX/0 Legal Cite 2155.144; Client Purchase PO must not exceed \$10,000.00 PO Amount: \$10,000.00; (2) Lines Requisition 0000196224

Pricing per Quote dated 7-12-22 for FY23 Term

Rate: See Price List

Line-Sch

PO Service Dates: 09/01/2022-08/31/2023 no renewals

Client Services as needed: Mortuary Services

Attached Terms and Conditions apply to this Purchase Order.

**Inventory Item ID - Line Description** 

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 and/or 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: Jessica Pender Phone: 325-481-3131

Email: shafferpioneer@ail.com

For: Agency/Facility: HHSC/San Angelo State Supported Living Center (SGSSLC)

Facility Contract Manager: Ida Montez, CTCM Phone: 325-465-2203

Email: ida.montez@hhs.texas.gov

Facility SME Contact: Ida Montez Phone: 325-465-2203

Email: ida.montez@hhs.texas.gov

PCS Contact: Cindy Atchley, CTCD Phone: 432-263-9617

Email: cindy.atchley@hhs.texas.gov

## **Health and Human Services Commission**

#### **Purchase Order**

Ship Via

**Payment Terms** 

Freight Terms

**Dispatch via Print** 

Net 30	rms Freight Terms N/A, Service, Pick up, etc	Ship V c. NONE		Purc	hase Order	HH	STX-3-0	000294400
specification	by informal bid, Invitation for Offer, os, terms, and conditions set forth in the	or Request for Proposa advertisement and ve	ndor's	<b>Date</b> 09/0	Revision	on		Page 2
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	HEALT 11640 U 11640 N Carlsbac	6433 - Carlsbad:11640 US Hwy 87 N HEALTH & HUMAN SERVICES COMMISSION 11640 US Hwy 87 N 11640 N US Hwy 87 Carlsbad TX 76934 United States			
Vendor:	1752852318 0 PIONEER GROUP INC 8009 US HIGHWAY 87 N SAN ANGELO TX 769016270 United States	WAY 87 N		— Bill T	HEALT 2501 M PO Box Abilene	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 2501 Maple St PO Box 451 Abilene TX 79602 United States		
					Fax: 325/795 Email: 710Acc	-3807 ounting@hhsc.s	state.tx.us	
Line-Sch	Inventory Item ID - Line Descripti	on Class/Item	Quantity	Purc UOM	haser: Atchley PO Price	Cindy Jean	xtended Amt	32/263-9617 <b>Due Date</b>
1-1	FY23 Client Services as needed; Mortuary Services/Basic Burial Serv for Client without insurance policies per-arranged funeral plans; DA1- SGSSLC; Reqn 196224	or	1.00	LOT	8000.0000 Schedule Tota		\$8,000.00 \$8,000.00	09/01/2022
VENDORS	SEND INVOICES VIA EMAIL TO: 7	10Accounting@hhsc.	state.tx.us		Item Total for Line	1	\$8,000.00	
2-1	FY23 Client Services as needed: Mortuary Services/Transportation to Tarrant Co. or Lubbock Co Medical Examiner's office. Lubbock 418 mile round trip Tarrant Co 490 miles rout trip \$2.00 a mile DA1-SGSSLC; Rec 196224	es nd	1.00	LOT	2000.0000	0	\$2,000.00	09/01/2022
VENDODO	GEND INVOICES WA FINAN TO T				Schedule Tota	al	\$2,000.00	
VENDUKS	SEND INVOICES VIA EMAIL TO: 7	ToAccounting@nhsc.	state.tx.us		Item Total for Line	2	\$2,000.00	
					Total PO Amoun	,	\$10,000.00	

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.

# **Health and Human Services Commission**

# **Purchase Order**

**Dispatch via Print** 

Payment To Net 30	erms Freight Terms N/A, Service, Pick up, etc.	<b>Ship Via</b> NONE	Purchase Order	HHSTX-3-0000294400
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.  All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			<b>Date</b> 09/01/22	Revision Page 3
			Ship To:	6433 - Carlsbad:11640 US Hwy 87 N HEALTH & HUMAN SERVICES COMMISSION 11640 US Hwy 87 N 11640 N US Hwy 87 Carlsbad TX 76934 United States
Vendor:	1752852318 0 PIONEER GROUP INC 8009 US HIGHWAY 87 N SAN ANGELO TX 769016270 United States		Bill To:	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
			Purchaser:	Atchley, Cindy Jean 432/263-9617
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extended Amt Due Date

Authorized By

Cindy atchley, CTCD

07/19/2022