## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via			\
Net 30	N/A, Service, Pick up, etc.	NONE	Purchase Order	HHSI	X-3-0000294481
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			<b>Date</b> 09/01/22	Revision Page	
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.			Ship To:	To: 1208 - San Antonio:11711 N IH35 HEALTH & HUMAN SERVICES COMMISSION 11711 N IH35 Ste 160 San Antonio TX 78233 United States	
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.					
** * 700	000515045			I ' IHIGOD ' O I	

70008517347 Vendor:

JOHN J ROCKEY

DBA RE 11711 BUSINESS CENTER

4723 COTTON BELT DR SAN ANTONIO TX 782192853

**United States** 

Invoice-HHSC Region 8, Inspect Bill To:

HEALTH & HUMAN SERVICES COMMISSION

11307 Roszell PO Box 23990 San Antonio TX 78217

United States

Fax: 210/619-8272

**Email:** Reg08\_Admin\_Services@hhsc.state.tx.us

Purchaser: Smith, Andre

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

FY23 Funding PO PO Expires 8/31/23 Region #8 LEASE# 11007

TGC CHAPTER 2167. LEASE OF SPACE FOR STATE AGENCIES

HHSC/PCS CONTACT: Andre Smith 512-406-2567 andre.smith@hhs.texas.gov

**CONTRACT MANAGER** CAROLINA DONADO, (210-215-8540); CAROLINA.DONADO@HHS.TEXAS.GOV

PM/PCC: EX/0

Requisition:0000193244

1-1 971-45 1.00 LOT 1648200.00000 \$1,648,200.00 08/31/2023

R08 FY23 RENEWAL, LEASE# 11007,

SA CALL CENTER

Schedule Total \$1,648,200.00 \$1,648,200.00 Item Total for Line 1

Total PO Amount \$1,648,200.00

## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Ter	rms Freight Terms	Ship Via		11110=1/10000001101	
Net 30	N/A, Service, Pick up, etc.	NONE	Purchase Order	HHSTX-3-0000294481	
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			Ship To:		
Vendor:	7000851734 7 JOHN J ROCKEY DBA RE 11711 BUSINESS CENTER 4723 COTTON BELT DR SAN ANTONIO TX 782192853 United States		Bill To:	Invoice-HHSC Region 8, Inspect HEALTH & HUMAN SERVICES COMMISSION 11307 Roszell PO Box 23990 San Antonio TX 78217 United States	
			Fax: Email:	210/619-8272 Reg08_Admin_Services@hhsc.state.tx.us	
			Purchaser:	Smith,Andre	

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.

Quantity

**UOM** 

**PO Price** 

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.

Class/Item

Line-Sch

**Inventory Item ID - Line Description** 

Authorized By

Carlos Mojica-etem-ctem

07/25/2022

Extended Amt

**Due Date**