

# Health and Human Services Commission

## Purchase Order

Dispatch via Print

|                                                                                                                                                                                                                                                                                                                                                |                                         |                             |                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Payment Terms</b><br>Net 30                                                                                                                                                                                                                                                                                                                 | <b>Freight Terms</b><br>Prepaid & Allow | <b>Ship Via</b><br>BEST WAY | <b>Purchase Order</b><br><b>HHSTX-3-0000295024</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><br>09/01/22                                                                                                                            |
| <b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>                                                                                                                                                                                                                         |                                         |                             | <b>Revision</b><br>Page<br>1                                                                                                                       |
|                                                                                                                                                                                                                                                                                                                                                |                                         |                             | <b>Ship To:</b><br>4517 - El Paso:4615 Alameda Ave<br>DEPARTMENT OF STATE HEALTH SERVICES<br>4615 Alameda Ave<br>El Paso TX 79905<br>United States |

**Vendor:** 1421584803 8  
BUG EXPRESS INCORPORATED  
2210 AUSTIN ST  
SAN ANGELO TX 769038758  
United States

**Bill To:** Invoice - DADS  
HEALTH & HUMAN SERVICES COMMISSION  
2501 Maple St  
PO Box 451  
Abilene TX 79602  
United States

**Fax:** 325/795-3807  
**Email:** 710Accounting@hhsc.state.tx.us

**Purchaser:** Bartelme, Tammy 512/406-2566

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

FY23 funding  
OM/Q  
Requisition 187701 - Solicitation 187701  
PO Service Dates 09/01/2022 to 08/31/2023

Attached Terms and Conditions apply to this Purchase Order.

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/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  
Bridget Carr  
325-653-0069  
bridget@bugexpress.com

Agency contact  
Perry Havard  
325-465-2300  
perry.havard@hhs.texas.gov  
San Angelo State Supported Living Center

PCS contact  
Tammy Bartelme  
512-406-2566  
Tammy.Bartelme@hhs.texas.gov

|                              |                        |        |      |     |             |             |            |
|------------------------------|------------------------|--------|------|-----|-------------|-------------|------------|
| 1-1                          | Exterminating Services | 910-59 | 1.00 | LOT | 17040.00000 | \$17,040.00 | 08/31/2023 |
| <b>Schedule Total</b>        |                        |        |      |     |             | \$17,040.00 |            |
| <b>Item Total for Line 1</b> |                        |        |      |     |             | \$17,040.00 |            |
| 2-1                          | Alternate #1 Fire Ants | 910-59 | 1.00 | LOT | 3500.00000  | \$3,500.00  | 08/31/2023 |
| <b>Schedule Total</b>        |                        |        |      |     |             | \$3,500.00  |            |

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|                                                                                                                                                                                                                                                                                                                                                |                                         |                             | <b>Ship To:</b><br>4517 - El Paso:4615 Alameda Ave<br>DEPARTMENT OF STATE HEALTH SERVICES<br>4615 Alameda Ave<br>El Paso TX 79905<br>United States |

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| Line-Sch                     | Inventory Item ID - Line Description     | Class/Item | Quantity | UOM | PO Price   | Extended Amt | Due Date   |
|------------------------------|------------------------------------------|------------|----------|-----|------------|--------------|------------|
| <b>Item Total for Line 2</b> |                                          |            |          |     |            | \$3,500.00   |            |
| 3-1                          | Fly Traps, miscellaneous and other items | 910-59     | 1.00     | LOT | 2000.00000 | \$2,000.00   | 08/31/2023 |
| <b>Schedule Total</b>        |                                          |            |          |     |            | \$2,000.00   |            |
| <b>Item Total for Line 3</b> |                                          |            |          |     |            | \$2,000.00   |            |
| <b>Total PO Amount</b>       |                                          |            |          |     |            | \$22,540.00  |            |

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.

|                                                                                                              |                   |
|--------------------------------------------------------------------------------------------------------------|-------------------|
| <b>Authorized By</b><br> | <b>07/19/2022</b> |
|--------------------------------------------------------------------------------------------------------------|-------------------|