Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Te	erms Freight Terms	Ship V	7ia				
Net 30	FOB Dest. Prepaid & Add	BEST		Purchase Order		HHSTX-3-00	000295033
specification	by informal bid, Invitation for Offer, or Rec is, terms, and conditions set forth in the adve	rtisement and ve	endor's	Date 09/01/22	Revision		Page 1
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:	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		MMISSION	
Vendor:	1391837105 8 4IMPRINT INC 25303 NETWORK PL CHICAGO IL 606731253 United States			Bill To:	Invoice - DADS HEALTH & HUI 2501 Maple St PO Box 451 Abilene TX 7960 United States	MAN SERVICES CO)2	PMMISSION
				Fax: Email:	325/795-3807 710Accounting@	Phhsc.state.tx.us	
				Purchaser:	Burns,Debra A		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
ITEMS TO	SS ITEM 080-65 BE ORDERED ON AS NEEDED BASIS SSLC - PROMOTIONAL ITEMS IMPRI						

SCOR Division: 19 State operated facilities

DO NOT PROCESS ORDERS PRIOR TO 09/01/2022

BLANKET PURCHASE ORDER

TERM: September 1, 2022 through August 31, 2023

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

FREIGHT: F.O.B Destination Freight Prepaid Allowed/Add

DELIVERY: DELIVERY PER FACILITY REQUEST - TBA days After Receipt of PO

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday Friday except designated State Holidays

AGENCY CONTACT:

PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** ***All orders will be submitted by Carrie Collins(325) 465-2264 carrie.collins@hhs.texas.gov SHIP TO ATTN Danny Melvin 325-465-2266 CELL #: Email: danny.melvin@hhs.texas.gov SME-Contract Manager: Ida Montez 325-465-2203 ida.montez@hhs.texas.gov

SHIP TO INFORMATION: 6433 BUILDING: Warehouse CONTACT: Danny Melvin PHONE 325-465-2266 CELL #: Email: danny.melvin@hhs.texas.gov

VENDORS SEND INVOICES VIA EMAIL TO: 710Accounting@hhsc.state.tx.us BILL TO INFORMATION Bill to: 4507 Abilene State Supported Living Center Attn: Accounts Payable PO Box 451 Abilene, TX 79604 Email: 710Accounting@hhsc.state.tx.us

HHSC BUYER: Debra Burns, CTPM Direct: 512) 406-2564 CELL

Health and Human Services Commission

Purchase Order

Net 30 F If advertised by informal b specifications, terms, and c conforming responses becc guarantees goods or servic requirements. All shipments, shipping p with our Purchase Order 13918371 Vendor: 13918371 4IMPRIN 25303 NE	es delivered meet or exceed number apers, invoices, and corresponde Number.	ement and vendor's ase order. Contractor ered purchase order	Purchase Order Date 09/01/22 Ship To:	Revision 6433 - Carlsbad:1	Dispatch via Prin HHSTX-3-000029503 Pag
Net 30 F If advertised by informal b specifications, terms, and c conforming responses becc guarantees goods or servic requirements. All shipments, shipping p with our Purchase Order Vendor: 13918371 4IMPRIN 25303 NE CHICAG	OB Dest. Prepaid & Add id, Invitation for Offer, or Request onditions set forth in the advertise ome a part of this numbered purcha es delivered meet or exceed number apers, invoices, and corresponden Number.	BEST WAY t for Proposal; all ment and vendor's ase order. Contractor ered purchase order	Date 09/01/22	Revision 6433 - Carlsbad:1	Pag
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4IMPRIN 25303 NE CHICAG	05.8	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.			1640 US Hwy 87 N IAN SERVICES COMMISSION ' N 87 4
	T INC TWORK PL O IL 606731253		Bill To:	Invoice - DADS HEALTH & HUM 2501 Maple St PO Box 451 Abilene TX 79602 United States	IAN SERVICES COMMISSION
			Fax: Email:	325/795-3807 710Accounting@h	uhsc.state.tx.us
			Purchaser:	Burns,Debra A	
Line-Sch Inventory I	em ID - Line Description C	lass/Item Quantity	UOM	PO Price	Extended Amt Due Date
Phone: 877-446-7746 ex Email:alasure@4imprint ***AMOUNT NOT TO EX		***			
ITERMS NET 30					
	RICING ATTACHED ***PROOF	-S REQUIRED****			
PURCHASING METHO Purchase not to exceed	D: SP/E \$10,000.00. Rule 34 Texas Adı	ministrative Code § 20.4	1 - Delegated Purcha	ses	
	ased or decreased upon need o e estimates only and do not cor			ies not ordered and	d received by August 31, 2023,
Goods and/or services a	re to be delivered and invoiced	after September 1, 2022	2.		
This PO is contingent up	on the continued availability of	lawful appropriations by	the Texas Legislatur	e. FY23 funding.	
Invoice per 34 TAC §20.	487, amended effective May 1,	2022			
Note: Agency will not or controlled assets on this		available from Workque	est, Texas Correction	al Industries or DIF	R. Agency will not order capital o
Requisition # 000019390	08				
	s to be ordered as needed by H to ordering specific quantities o				tate Supported Living Center.
maximum that the agend		obligated to pay for only	those goods actually		ot be construed as a minimum or ved by the agency. Any funds no
Adding Now Broducts to	the Contract:				

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					-		
				Purchaser:	Burns,Debra A		
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Following that are not alre	Inventory Item ID - Line Description ne contract award, additional products of ady on the contract, may be added. FY23 Blanket SGSSLC Staff Appreciation Promotional Specified Items Imprinted TERM 9/1/22-8/31/23 DA1 SGSSLC		- c - <i>i</i>	UOM that could have beer LOT 10	PO Price n encompassed in 0000.00000	the award of this c \$10,000.00	
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are not aire 1-1 IMPRINT Sa	FY23 Blanket SGSSLC Staff Appreciation Promotional Specified Items Imprinted TERM 9/1/22-8/31/23	f the same gene	eral category	UOM that could have been LOT 10 Scho	PO Price n encompassed in 0000.00000	the award of this c \$10,000.00 \$10,000.00	ontract, and tha

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	
abrat Freezeward	
	<u>07/19/2022</u>

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