

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000296731
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.			Date 09/01/22
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 1
			Ship To: 2203 - Big Spring; 1901 N Highway 8 HEALTH & HUMAN SERVICES COMMISSION 1901 N Highway 87 Big Spring TX 79720 United States

Vendor: 1261533189 4
CUMMINS SOUTHERN PLAINS LLC
PO BOX 90027
ARLINGTON TX 760043027
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@hhs.state.tx.us

Purchaser: Mcfadden, Danny 512/406-2671

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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Req 195086
NIGP: 936/39
FY23 PO Funding Period 9/1/22-8/31/23

SOURCEWELL GPO and HHS Contract # HHS000789700001

SOURCEWELL GPO HHS Membership ID [REDACTED]

SOURCEWELL GPO and Cummins Contract # 120617-CMM

PURCHASING METHOD: EX/0
Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

REQUIREMENTS/LIMITATIONS:
This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding.

Invoice per 34 TAC §20.487, amended effective May 1, 2022

Vendor Name: CUMMINS SOUTHERN PLAINS LLC.
Vendor ID#: 1261533189 4
Vendor Contact: Fernando Cruz
Vendor address: P.O. Box 90027, Arlington, Texas 760043027
Vendor phone: 915-791-6605
Vendor email: f.cruz@cummins.com

Program SME Name: Joshua Rainey
Lead Contact Email: joshua.rainey@hhs.texas.gov
Lead Contact Phone: 432-268-7428
Facility: Big Spring State Hospital

Contract Manager Name: Donna Lee, CTCM
Contract Manager Email: donna.lee@hhs.texas.gov
Contract Manager Phone: 432-268-7975

PCS Purchasing Contact: Danny McFadden
Phone: 512-406-2671
Email: danny.mcfadden@hhs.texas.gov

PCS Email PO to: norma.garcia5@hhs.texas.gov (Maintenance)
donna.lee@hhs.texas.gov (Facility Contract Specialist-CTCM)

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VENDORS SEND INVOICES VIA EMAIL TO
710Accounting@hhsc.state.tx.us

PO BILL TO INFORMATION
HHSC Health and Specialty Care System
Abilene Regional Business Office
Attn: Accounting Department
PO Box 451
Abilene, TX 79604
CODE # 4507
Email: 710accounting@hhsc.state.tx.us

FY22 Danny McFadden
FY22 PO 262024
Contract PO HHS000910600001 Expires 8/31/22

STATEMENT OF WORK ATTACHED
VENDOR QUOTES ATTACHED
GENERATOR FACT SHEET

Item(s): FY23 (Services) Blanket Purchase Order for Full service planned maintenance on 12 Generac and Cummins generators at the Big Spring State Hospital from 09/01/22 thru 08/31/23. Purchase Order request is \$11,317.91.

Justification: Blanket purchase order for preventive maintenance on Big Spring State Hospitals 12 emergency generators. Generators are used as an emergency power source during a utility failure at the facility. To comply with Joint Commissions standards to maintain a safe and functional environment

Assign to the PCS Construction team

FACILITY: BIG SPRING STATE HOSPITAL
REQ NAME: FY23 CUMMINS SOUTHERN
ITEM DESCRIPTION: FY23, CF6, F3B010
SERVICES OR GOODS / PO REQUEST / \$11,317.91

SCOR Division: 19 HHSC - State Operated Facilities
SCOR Other Subject: CF6-BSH: Generator PMs
NPI Class: 936-39 UOM: LOT ACCT: ██████ Program: F2200

PCS PLEASE CONTACT DONNA LEE, CONTRACT SPECIALIST FOR QUESTIONS

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FY23 (Services) Blanket Purchase Order
for full service planned maintenance on
12 Generac and Cummins generators at
the Big Spring State Hospital from
9/1/22 to 8/31/23

Schedule Total \$11,317.91


Item Total for Line 1 \$11,317.91

Total PO Amount \$11,317.91

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 	08/02/2022
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