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

### **Purchase Order**

**Dispatch via Print** 

Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHS	STX-3-0000297301
If advertised specification	by informal bid, Invitation for Offer, or Is, terms, and conditions set forth in the ac	Request for Proposal; all dvertisement and vendor's	Date 09/01/22	Revision	Page 1
guarantees go requirements All shipmen	responses become a part of this numbered cods or services delivered meet or exceed ts, shipping papers, invoices, and corre- rchase Order Number.	numbered purchase order	Ship To:	5950 - El Paso:6700 Del HEALTH & HUMAN SI 6700 Delta Dr 6700 Delta Dr El Paso TX 79905 United States	ta Dr ERVICES COMMISSION
Vendor:	1391519806 6 DIRECT SUPPLY INC PO BOX 88201 MILWAUKEE WI 53288-8201 United States		Bill To:	Invoice-DSHS Accounts DEPARTMENT OF STA 1200 E Brin PO Box 70 Terrell TX 75160 United States	Payable ATE HEALTH SERVICES
			Fax: Email:	972/551-8052 DSHS.TSHBusinessOffic	ce@dshs.texas.gov
			Purchaser:	Wherry,Valerie F	940/720-8479

PLEASE REPLY TO CONFIRM RECEIPT OF THIS PURCHASE ORDER TO FAX NUMBER (940)720-8446 OR TO valerie.wherry@hhs.texas.gov

Quantity

**UOM** 

PO Price

**Extended Amt** 

**Due Date** 

Class/Item

**BLANKET PURCHASE ORDER** 

TERM: September 1, 2022 through August 31, 2023

SHIPPING INSTRUCTIONS: DO NOT SHIP until notified by Agency Contact.

FREIGHT: F.O.B Destination Freight Prepaid and Allowed

**Inventory Item ID - Line Description** 

DELIVERY: 5-7 days After Receipt of PO

AGENCY DELIVERY CONTACT:

Priscilla Hernandez (915)782-6613

Line-Sch

priscilla.hernandez@hhs.texas.gov

HHSC BUYER: Valerie Wherry, CTCD (940)720-8479

valerie.wherry@hhs.texas.gov

VENDOR: Michael Olson (888)629-6530

michael.olson@directsupply.com

QUOTE #14923836-A

PREMIER GPO and HHSC Contract # HHS000776400001

PURCHASING METHOD: EX-0

Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

Requisition # 0000187441

Goods and/or services are to be delivered and invoiced after September 1, 2022.

# **Health and Human Services Commission**

### **Purchase Order**

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Payment Terms	Freight Terms	Ship Via			
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHST	X-3-0000297301
specifications, terms	ormal bid, Invitation for Offer, or I s, and conditions set forth in the ac	lvertisement and vendor's	<b>Date</b> 09/01/22	Revision	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.		Ship To:	5950 - El Paso:6700 Delta Dr HEALTH & HUMAN SERVICES COMMISSION 6700 Delta Dr		
All shipments, ship with our Purchase	ping papers, invoices, and corre Order Number.	spondence must be identified		6700 Delta Dr 6700 Delta Dr El Paso TX 79905 United States	
Vendor: 139	91519806 6		Bill To:	Invoice-DSHS Accounts Pay	able

DIRECT SUPPLY INC PO BOX 88201

MILWAUKEE WI 53288-8201

**United States** 

DEPARTMENT OF STATE HEALTH SERVICES

1200 E Brin PO Box 70 Terrell TX 75160 United States

972/551-8052 Fax:

DSHS.TSHBusinessOffice@dshs.texas.gov Email:

				Purchaser:	Wherry, Valerie F	940/720-8479
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt Due Date

Any goods or services not ordered and received by August 31, 2023 will be considered cancelled.

Amount may be increased/decreased upon need.

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature.

Note: Agency will not order goods or services on this PO that are available from Workquest, Texas Correctional Industries or DIR. Agency will not order capital or controlled assets or equipment on this PO.

FY23 Quoted Pricing - Additional products of the same general category may be ordered from this PO.

#6HH12, Flo-Trol Vacuum Cup, Cs/20 - \$164.99 #2H444, Aluminum Rollator w/Foldaway and Removable Backrest and Padded Seat (Red) - \$131.99 #46056, 3" Deluxe Twin Wheel Replacement Casters, Set of 4 - \$109.99

1-1	FY23 Blanket for Dining equipment	470-45	1.00	LOT	2000.00000	\$2,000.00	09/01/2022
	0 1 1				Schedule Total	\$2,000.00	
					Item Total for Line 1	\$2,000.00	
2-1	FY23 Blanket for Wheelchair Parts	470-80	1.00	LOT	5000.00000	\$5,000.00	09/01/2022
					Schedule Total	\$5,000.00	
					Item Total for Line 2	\$5,000.00	
3-1	FY23 Blanket for Shower chairs	470-20	1.00	LOT	3000.00000	\$3,000.00	09/01/2022
					Schedule Total	\$3,000.00	
					Item Total for Line 3	\$3,000.00	
					Total PO Amount	\$10,000.00	

# **Health and Human Services Commission**

#### **Purchase Order**

**Dispatch via Print** 

Payment T Net 30	erms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-000029730
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 Pag
guarantees grequirement	responses become a part of this numbered goods or services delivered meet or exceed ts.  nts, shipping papers, invoices, and correspondence of Number.	numbered purchase order	Ship To:	5950 - El Paso:6700 Delta Dr HEALTH & HUMAN SERVICES COMMISSION 6700 Delta Dr 6700 Delta Dr El Paso TX 79905 United States
Vendor:	1391519806 6 DIRECT SUPPLY INC PO BOX 88201 MILWAUKEE WI 53288-8201 United States		Bill To:	Invoice-DSHS Accounts Payable DEPARTMENT OF STATE HEALTH SERVICES 1200 E Brin PO Box 70 Terrell TX 75160 United States
			Fax: Email:	972/551-8052 DSHS.TSHBusinessOffice@dshs.texas.gov
			Purchaser:	Wherry, Valerie F 940/720-8479
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extended Amt Due Date

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

Valerie Wheny, CTCD

08/05/2022