## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

| Payment Te<br>Net 30   | Prepaid & Allow  | <b>Ship V</b> i<br>BEST V | WAY                     | Purchase Order  | ŀ                                    | HSTX-3-0000297890      |
|--|--|---------------------------|-------------------------|---|--------------------------------------|------------------------|
| If advertised by informal bid, Invitation for Offer, or Request for Proposal; all<br>specifications, terms, and conditions set forth in the advertisement and vendor's<br>conforming responses become a part of this numbered purchase order. Contractor<br>guarantees goods or services delivered meet or exceed numbered purchase order<br>requirements.<br>All shipments, shipping papers, invoices, and correspondence must be identified<br>with our Purchase Order Number. |  |                           | <b>Date</b><br>09/01/22 | Revision  |                                      |                        |
|  |  |                           | Ship To:                | 5950 - El Paso:670<br>HEALTH & HUM/<br>6700 Delta Dr<br>6700 Delta Dr<br>El Paso TX 79905<br>United States                            | 0 Delta Dr<br>AN SERVICES COMMISSION |                        |
| Vendor:  | 1465133460 0<br>HIGH DESERT ENTERPRISES LLC<br>DBA MOBILITY PRODUCTS OF EL PASO<br>8630 BOEING DR STE 12<br>EL PASO TX 799251256<br><b>United States</b> |                           | Bill To:                | Invoice-DSHS Accounts Payable<br>DEPARTMENT OF STATE HEALTH SERVICES<br>1200 E Brin<br>PO Box 70<br>Terrell TX 75160<br>United States |                                      |                        |
|  |  |                           |                         | Fax:<br>Email:  | 972/551-8052<br>DSHS.TSHBusines      | sOffice@dshs.texas.gov |
|  |  |                           |                         | Purchaser:  | Bartelme,Tammy                       | 512/406-2566           |
| Line-Sch   | <b>Inventory Item ID - Line Description</b>  | Class/Item                | Quantity                | UOM   | PO Price                             | Extended Amt Due Date  |

FY23 funding OM/Q Requisition 190664 - Solicitation 190664 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 Eric Green 915-779-2200 mobilityproducts23@yahoo.com

Agency contact James W. Lannon 915-782-6455 james.lannon@hhs.texas.gov El Paso State Supported Living Center

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

| 1-1 |   | 928-33 | 1.00 | LOT | 15000.00000           | \$15,000.00 | 08/31/2023 |
|-----|---|--------|------|-----|-----------------------|-------------|------------|
|     | Mobility Repair Services                |        |      |     |                       |             |            |
|     | Standard hourly rate \$90 per hour      |        |      |     |                       |             |            |
|     | Overtime hourly rate \$135 per hour     |        |      |     |                       |             |            |
|     | Parts markup above Contractor cost - up |        |      |     |                       |             |            |
|     | to 50%                                  |        |      |     |                       |             |            |
|     |   |        |      |     | Schedule Total        | \$15,000.00 |            |
|     |   |        |      |     |                       |             |            |
|     |   |        |      |     | Item Total for Line 1 | \$15,000.00 |            |
|     |   |        |      |     |                       |             |            |

## **Health and Human Services Commission**

## **Purchase Order**

| Payment Te   | rms Freight Terms   | Ship Via  |   |   | Dispa             | tch via Print |
|--|---|---|---|---|-------------------|---------------|
| Net 30   | Prepaid & Allow   | BEST WAY  | Purchase Order  | F   | HSTX-3-00         | 00297890      |
| If advertised by informal bid, Invitation for Offer, or Request for Proposal; all<br>specifications, terms, and conditions set forth in the advertisement and vendor's<br>conforming responses become a part of this numbered purchase order. Contractor<br>guarantees goods or services delivered meet or exceed numbered purchase order<br>requirements.<br>All shipments, shipping papers, invoices, and correspondence must be identified<br>with our Purchase Order Number. |   |   | Date<br>09/01/22  | Revision  |                   | Page<br>2     |
|  |   |   | Ship To: 5950 - El Paso:6700 Delta Dr<br>HEALTH & HUMAN SERVICES (<br>6700 Delta Dr<br>6700 Delta Dr<br>El Paso TX 79905<br>United States |   |                   | COMMISSION    |
| Vendor:  | 1465133460 0<br>HIGH DESERT ENTERPRISES LLC<br>DBA MOBILITY PRODUCTS OF EL<br>8630 BOEING DR STE 12<br>EL PASO TX 799251256<br><b>United States</b> | H DESERT ENTERPRISES LLC<br>A MOBILITY PRODUCTS OF EL PASO<br>9 BOEING DR STE 12<br>PASO TX 799251256 |   | Invoice-DSHS Accounts Payable<br>DEPARTMENT OF STATE HEALTH SERVIO<br>1200 E Brin<br>PO Box 70<br>Terrell TX 75160<br>United States |                   | I SERVICES    |
|  |   |   | Fax:<br>Email:  | 972/551-8052<br>DSHS.TSHBusiness  | sOffice@dshs.texa | s.gov         |
|  |   |   | Purchaser:  | Bartelme,Tammy  | 51                | 2/406-2566    |
| 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  |              |                   |
|----------------|--------------|-------------------|
| Jamm Barbelone | CTCD<br>CTCM | <u>08/10/2022</u> |