Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	STX-3-0000297958	
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. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Date 09/01/22	Revision Page 1		
			Ship To:	Chip To: 4553 - Austin:4616 W Howard Ln HEALTH & HUMAN SERVICES COMMISS 4616 W Howard Ln		
				Bldg 2 Ste 300 Austin TX 78728 United States		
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Vendor: 1760393601 8

MASTERWORD SERVICES INC

303 STAFFORD ST HOUSTON TX 770792345

United States

Bill To: Invoice-HHSC Accounting

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

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

Requisition 194539

OMNIA GPO and HHS Contract # HHS000840200001

Pricing per attached preferred pricing list which also match with recent attached signed contract with DFPS also attached for reference. HHSC, DFPS and DSHS should all be included with preferred pricing if services requested.

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

GPO: OMNIA Partners

Supplier/Master Agreement: MasterWord Services, Inc. -

Blanket PO Term: 9/1/2022 through 8/31/2023

Funding Source: Solely Federal Funds

NIGP Class/Item: 961-75

Match Rule for PO: Two-Way

Attachment(s):

#2 W-9 Form

Vendor Information: Vendor ID: 17603936018 MasterWord Services, Inc. 303 Stafford Street Houston, TX 77079

Contact: M. Cody Francisco

Email: cfrancisco@masterword.com or bids@masterword.com

Phone: 281-589-0810

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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			Date 09/01/22	Revision Page 2		
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Vendor: 176	60393601 8		Bill To:	Invoice-HHSC Accounting	lo.	

MASTERWORD SERVICES INC

303 STAFFORD ST HOUSTON TX 770792345

United States

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

Item Total for Line 2

Total PO Amount

\$55,000.00

\$58,000.00

Purchaser: Mcfadden, Danny 512/406-2671 Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity **UOM** PO Price Extended Amt Due Date

Contract Manager: Connie Booker

Phone: 512-341-4524

Email: connie.booker1@hhs.texas.gov

PCS Purchaser: Danny McFadden

Phone: 512-406-2671

Email: danny.mcfadden@hhs.texas.gov

WIC Program End-User/Contact: Allison Mayer / Allison.Mayer@hhs.texas.gov

Direct questions regarding requisition to:

Connie Booker / 512-341-4524 / connie.booker1@hhs.texas.gov

NOTE INVOICING COMMENTS (FOR HHS ACCOUNTS PAYABLE USE ONLY): WIC PROGRAM INVOICE APPROVER: MELISSA ANDERSON AT MELISSA.ANDERSON@HHS.TEXAS.GOV (FOR HHS ACCOUNTS PAYABLE USE ONLY)

961-75 1.00 LOT 3000.00000 1-1 \$3,000.00 09/01/2022 FY23 OMNIA Partners GPO, MasterWord Services, Inc. Contract As-needed Document Translation Services from 9/1/2022 through 9/30/2022. Schedule Total \$3,000.00 Item Total for Line 1 \$3,000.00 55000.00000 961-75 1.00 LOT \$55,000.00 09/01/2022 2-1 FY23 OMNIA Partners GPO, MasterWord Services, Inc. Contract As-needed Document Translation Services from 10/1/2022 through 8/31/2023. Schedule Total ___ \$55,000.00

Health and Human Services Commission

Purchase Order

Dispatch via Print

Due Date

Extended Amt

Payment Ter	8	Ship Via		LUIOTY	0.000007050	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSIX	-3-0000297958	
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Vendor:	1760393601 8 MASTERWORD SERVICES INC 303 STAFFORD ST HOUSTON TX 770792345 United States		Bill To:	Invoice-HHSC Accounting HEALTH & HUMAN SERVICES COMMISSION 4601 W Guadalupe St Austin TX 78751 United States		
			Fax: Email:	512/424-6901 HHSC_AP@hhsc.state.tx.us		
			Purchaser:	Mcfadden,Danny	512/406-2671	

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.

Quantity

UOM

PO Price

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.

Class/Item

Line-Sch

Inventory Item ID - Line Description

Authorized By

Dangue fallors CTED, ET CM

08/11/2022