Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via			10=1/ 0 00000	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HF	HSTX-3-0000297991	
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 1		
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:	ip To: 3137 - Tyler:3303 Mineola Hwy HEALTH & HUMAN SERVICES COMMISSION 3303 Mineola Hwy		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				PO Box 5200 Tyler TX 75702 United States		
1-	440550544					

Vendor: 1741976051 1

WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States Bill To: Invoice-HHSC; Region 04 Headqu

HEALTH & HUMAN SERVICES COMMISSION

302 E Rieck Rd Tyler TX 75703 United States

Fax: 903 534 8487

Email: paula.thurman@hhsc.state.tx.us

Purchaser: Mcknight, Aaron

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

FY23 funding EX/0 TGC 2155.138

Requisition 197494 Quote confirmed by email from Deidra Davis on 8/11/22

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 Deidra Davis 956-465-4328 ddavis@workquest.com

Agency Contact Gar Phonsnasinh 903-509-5166 Gar.phonsnasinh@hhs.texas.gov

PCS Contact Aaron McKnight 512-406-2641 Aaron.mcknight03@hhs.texas.gov

1-1 988-36 12.00 MOS 224.97000 \$2,699.64 09/01/2022

R04 - FY23 - Lawn Services for the facility located at Tyler, 3303 Mineola Highway, MC 3137.

Schedule Total \$2,699.64

Requester: Gar Phonsnasinh / 903-509-5166 / gar.phonsnasinh@hhs.texas.gov

BILL TO LOCATION CODE: 3135 Health and Human Services Commission 302 E. RIECK ROAD, TYLER, TX 75703

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17	41076051.1]	United States	04.11	

Vendor: 1741976051 1

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HEALTH & HUMAN SERVICES COMMISSION

302 E Rieck Rd Tyler TX 75703 United States

Fax: 903 534 8487

Email: paula.thurman@hhsc.state.tx.us

Purchaser: Mcknight, Aaron

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

SEND INVOICES TO: reg04_admin_services@hhs.texas.gov

SUPER USER: Esperanza.McMeans@hhs.texas.gov / 903-509-5131

SCOR DIVISION # 13 HHSC - System Support Services

Please follow the Texas Comptroller's Invoicing standards as seen below.

Include PO Number on invoices, bills, receipts, bill lading, packing slips, and back order.

(a) To receive payment, a contractor must submit an invoice to the State Agency receiving the goods or services.

The invoice should include, but is not limited to including:

- (1) the contractor's mailing and e-mail (if applicable) address;
- (2) the contractor's telephone number;
- (3) the name and telephone number of a person designated by the contractor to answer questions regarding the invoice;
- (4) the state agency's name, agency number, delivery address;
- (5) the state agency's purchase order number, if applicable;
- (6) the contract number or other reference number, if applicable;
- (7) a valid Texas identification number (TIN) issued by the Comptroller;
- (8) a description of the goods or services, in sufficient detail to identify the order which relates to the invoice;
- (9) unit numbers corresponding to the amount of the invoice;
- (10) if submitting an invoice after receiving an assignment of a contract, the TIN of the original contractor and the TIN of the successor vendor;
- (11) other relevant information supporting and explaining the payment requested.

VENDOR INFO:

VIN# 17419760511 / WorkQuest

Notes to Purchaser:

Add PCC code to PO copy, if any

Please add Requisition number on PO copy

R04 - FY23 - Lawn Services for the facility located at Tyler, 3303 Mineola Highway, MC 3137.

FY22 PO HHSTX-2-0000269781

HHS Contact: Gar Phonsnasinh (903) 509-5166 gar.phonsnasinh@hhs.texas.gov Vendor Contact: Channion Burnett (903) 348-3223 cloudcommercialcleaning.com

 Total PO Amount
 \$2,699.64

Health and Human Services Commission

Purchase Order

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Payment Terr Net 30	Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-0000297991
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Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States		Bill To:	Invoice-HHSC; Region 04 Headqu HEALTH & HUMAN SERVICES COMMISSION 302 E Rieck Rd Tyler TX 75703 United States
			Fax: Email:	903 534 8487 paula.thurman@hhsc.state.tx.us

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

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.

Purchaser:

UOM

Mcknight, Aaron

PO Price

Extended Amt

Due Date

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

08/11/2022