

# Health and Human Services Commission

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000298003</b>
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.			<b>Date</b> 09/01/22
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 1
			<b>Ship To:</b> 1111 - El Paso:401 Franklin Ave HEALTH & HUMAN SERVICES COMMISSION 401 Franklin Ave Ste 450 El Paso TX 79901 United States

**Vendor:** 1741976051 1  
WORKQUEST  
1011 E 53RD 1/2 ST  
AUSTIN TX 787511703  
United States

**Bill To:** Invoice-HHSC Region 10, DADS:  
HEALTH & HUMAN SERVICES COMMISSION  
401 Franklin Ave  
Ste 450  
El Paso TX 79901  
United States

**Fax:** 915/834-7587

**Purchaser:** Lafosse,Betty J 210/337-3187

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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Order issued in accordance with Comptroller of Public Accounts (CPA) Managed Term Contract 962-S5  
 Large Package Only Over 150lbs Freight and Logistics Services  
 Contract Term 3/1/2017 to 11/30/2026  
 PM/PCC: EX/0  
 Doc Type 9 Texas Government Code 2155.441  
 CLASS/ITEM: 962-86  
 REQ: 0000199467  
 FY23 Funding: 9/1/22 through 8/31/2023  
 Goods and/or services are to be delivered and invoiced after 9/1/22  
 This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature  
 In the event of conflict between terms of parties, HHS-PCS terms and conditions shall prevail.  
 Terms and Conditions will be in accordance with existing Contract 962-S5 established by CPA  
 This purchase order is subject to cancellation, without penalty, either in whole or in part, if funds are not appropriated by the Texas Legislature.

HHSC Purchasing Contact: Betty La Fosse  
 PHONE: 210 337-3187  
 FAX: 210 337-3496  
 EMAIL: betty.lafosse@hhs.texas.gov

REQUESTER CONTRACT MANAGER: Sheila.Tillman@hhs.texas.gov 915 834-7611

SUPER USER ENTRY PERSON: Briseida.Gonzalez04@hhs.texas.gov 915 834-7662

VID: 174 19760511  
 VENDOR: WorkQuest  
 CONTACT: J. Kyle Radford, Director of Strategic Business Development  
 PHONE: 512 451-8145  
 EMAIL: kradford@workquest.com  
 ADDRESS: 1011 EAST 53 STREET AUSTIN, TX 78751  
 Other Contact: JD Fripp 832 379-3101 Email: jfripp@workquest.com

Southeast Vocational Alliance (SVA) Community Resource Program (CRP)  
 SVA CONTACT: Edgar Cantu ecantu@svalogistics.com  
 PHONE 281 369-5304 CELL 832 806-5161

SVA CONTACT: Ryan Schaefer rschaefer@svalogistics.com  
 TOLL FREE: 800 743-8440

HHSC or the agency does not commit to ordering specific quantities of services/goods or dollar amounts with respect to this purchases order. This agency shall be obligated to pay for only those services/goods ordered and received by the agency. Any funds not utilized by 8/31/23 are automatically cancelled.

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Questions or concerns regarding payment please send an email or call the Agency Contact listed above or please see information provided in the "bill to" section of the purchase order

PLEASE SEND THE INVOICES TO: Reg10\_AP@hhs.texas.gov

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

Include PO Number on invoices, bills, receipts, bill of 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, and 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.

Reference Info: FY22 PO HHSTX-2-0000266032

1-1	FY23 HHS Region 10; WorkQuest Managed Contract 962-S5 Large Package Only; Freight and Logistics Services; Term 9/1/22 to 8/31/23	962-86	1.00	LOT	1000.00000	\$1,000.00	09/01/2022
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<b>Schedule Total</b>	\$1,000.00
<b>Item Total for Line 1</b>	\$1,000.00
<b>Total PO Amount</b>	\$1,000.00

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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**

*Betty La Josse CTPM*

**08/11/2022**