

# 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-3-0000298783</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> Page 1
			<b>Ship To:</b> 4038 - Corpus Christi:902 Airport HEALTH & HUMAN SERVICES COMMISSION 902 Airport Rd Corpus Christi TX 78405 United States

**Vendor:** 1862820610 6  
HUNTER HABERZETTLE  
DBA CIRCLE H CONSTRUCTION  
PO BOX 18487  
CORPUS CHRISTI TX 784808487  
United States

**Bill To:** Invoice - DADS  
HEALTH & HUMAN SERVICES COMMISSION  
4001 Highway 36 South  
Brenham TX 77833  
United States

**Fax:** 979/277-1865  
**Email:** 712Accounting@hhs.texas.gov

**Purchaser:** Griffin,Valerie 512/406-2458

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY23 Funding

OM/Q

Requisition: 0000195051 - Awarded from Informal Solicitation#REQ0000195051

PO Service Dates: 09-01-2022 to 08-31-2023

Attached Terms and Conditions apply to this Purchase Order.

ATTN VENDOR: PLEASE SEND INVOICES VIA EMAIL TO: 712accounting@hhs.texas.gov

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**

First and Last Name: Hunter Habberzettle  
Phone number: 361.425.4394  
Email address: Circlehconstruction@yahoo.com

**Agency Contact**

First and Last Name: Michelle Samora  
Phone number: 361.844.7944  
Email address: Michelle.Samora@hhs.texas.gov

**PCS contact**

First and Last Name: Valerie Griffin  
Phone number:512.406.2458  
Email address: Valerie.Griffin@hhs.texas.gov

1-1	FY23 - As needed Concrete Repairs and Services; CH3-CCSSLC	913-62	1.00	LOT	24500.00000	\$24,500.00	09/01/2022
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**Schedule Total** \$24,500.00

Hourly regular labor rate - \$100.00/hr per man  
Hourly overtime labor rate - \$125.00/hr per man

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Percentage of markup on parts - 30%

Copy of SOW is attached

**Item Total for Line 1** \$24,500.00

**Total PO Amount** \$24,500.00

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 Griffin, CTCD, CTCM*

**08/19/2022**