Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	s Freight Terms	Ship Via		,		
Net 30	Prepaid & Allow	BEST WAY	Purchase Order		HHSTX-3-0000299203	
specifications, te	informal bid, Invitation for Offer, or Ferms, and conditions set forth in the ad	lvertisement and vendor's	Date 09/01/22	Revision	Page 1	
	onses become a part of this numbered s or services delivered meet or exceed		Ship To:	5059 - Kerrville:721 Thompson Dr HEALTH & HUMAN SERVICES COMMISSION 721 Thompson Dr		
	shipping papers, invoices, and corre ase Order Number.	spondence must be identified		Kerrville TX 7802 United States		
Vendor:	1471087871 2		Bill To:	Invoice-DSHS Acc	counts Payable	

ARCHER ROSE LLC 1404 SIDNEY BAKER ST **KERRVILLE TX 78028-2725**

United States

HEALTH & HUMAN SERVICES COMMISSION

6711 S New Braunfels

Ste 100

San Antonio TX 78223

United States

Fax: 210/531-7883

SAHAccounting@dshs.texas.gov **Email:**

512/406-2685 Lyncook, Shawn Patrick Purchaser: Line-Sch **UOM Inventory Item ID - Line Description** Class/Item Quantity PO Price Extended Amt **Due Date**

FY23 Funding Requisition 196632

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

OM/Q - Phone bid - Texas Government Code 2156.063.

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.

Facility: Kerrville State Hospital, 721 Thompson Dr., Kerrville TX 78028

PCS contact Shawn 'Patrick' LynCook 512-406-2685 shawn.lyncook@hhs.texas.gov

PCS PLEASE CONTACT: Melissa Maddox for Questions.

VENDORS SEND INVOICES VIA EMAIL TO: SAHACCOUNTING@dshs.texas.gov

Vendor Name: Archer Rose LLC Vendor Contact: Bill Plyler Vendor Phone: 830-995-9272

Vendor Email: bill@kerrvillemedical.com

SME/Lead Contact: Melissa Maddox/Mary Thompson

Lead Email: Melissa.Maddox@hhs.texas.gov Mary.Thompson@hhs.texas.gov

Lead Phone: 210-531-7357 / 830-258-5214

Contract Manager: Melissa Maddox, Contract Manager Contract Manager Email: Melissa.Maddox@hhs.texas.gov

CM Phone: Office (210) 531-7357

SCOR Division: 19 - State Operated Facilities

PCS Email PO/CPO to:

(Program SME/LEAD): Mary.Thompson@hhs.texas.gov (Facility Contract Specialist): Melissa.Maddox@hhs.texas.gov

(Accounting): SAHACCOUNTING@dshs.texas.gov

Health and Human Services Commission

Purchase Order

Freight Terms

Payment Terms

Dispatch via Print

Net 30	erms Freight Terms Prepaid & Allow	Ship V BEST		Purch	ase Order		HHSTX-3-0	000299203	
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			endor's	Date 09/01/22		Revision		Page 2	
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.					To:	5059 - Kerrville:721 Thompson Dr HEALTH & HUMAN SERVICES COMMISSION 721 Thompson Dr Kerrville TX 78028 United States			
Vendor:	1471087871 2 ARCHER ROSE LLC 1404 SIDNEY BAKER ST KERRVILLE TX 78028-2725 United States			Bill To: Fax: Email:		Invoice-DSHS Accounts Payable HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States 210/531-7883 SAHAccounting@dshs.texas.gov			
Line-Sch	Inventory Item ID - Line Description	Class/Item	Ouantity	Purch UOM	aser:	Lyncook,Shaw	vn Patrick 5 Extended Amt	12/406-2685 Due Date	
1-1	FY23 patient oxygen	430-48	1.00	LOT		000.00000 dule Total	\$3,000.00 \$3,000.00	09/01/2022	
2-1 1	FY23 Rental Fees	979-45	1.00			For Line 1	\$3,000.00 \$14,800.00	09/01/2022	
					Schedule Total Item Total for Line 2				
3-1	FY23 supplies	430-48	1.00	LOT	5	500.00000	\$5,500.00	09/01/2022	
						dule Total			
					Item Total f	for Line 3	\$5,500.00		
					T . 1 D	O Amount	\$23,300.00		

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

Affle GED, GEM

08/25/2022