Health and Human Services Commission

Purchase Order

Payment Ter	rms Freight Terms	Ship Via		Dispat	ch via Print
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-3-00	00299277
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:	5070 - Harlingen:1401 S Rangervill DEPARTMENT OF STATE HEALTH SERVICES 1401 S Rangerville Rd PO Box 2668 Harlingen TX 78552 United States	
Vendor:	1410231510 9 ECOLAB INC P O BOX 70343 CHICAGO IL 60673-0343 United States		Bill To:	Bill To: Invoice-DSHS Accounts Payable HEALTH & HUMAN SERVICES COM 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States	MMISSION
			Fax: Email:	210/531-7883 SAHAccounting@dshs.texas.gov	
			Purchaser:	Lyncook,Shawn Patrick 51	2/406-2685
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extended Amt	Due Date

PCS - Please send copy of TPO to Agency Contact, Vendor Contact, Payment Processing Dept and Contract Manager PCS please include the following wording on TPO: Payment Inquiries and Invoices are to be submitted to SAHAccounting@dshs.texas.gov

Agency Contact: Joel Juarez, Housekeeping Manager joel.juarez@hhs.texas.gov, 956-364-8474

Vendor Contact: Dale Mrozinski, dale.mrozinski@ecolab.com, 956-852-0958, gov.sales@ecolab.com

Payment Processing Dept.: SAHAccounting@dshs.texas.gov

Contract Manager: Maria G. Rodriguez, CTCM, mariag.rodriguez2@hhs.texas.gov, 956-364-8427

SCOR DIV 19 State Operated Facilities Billing Code: 3071; Ship To: 5070; Deliver To: 5070; Mail Code 6048 Facility: Rio Grande SSLC, 1401 S Rangerville Rd., Harlingen, TX 78552

FY23 Funding Requisition 190661 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.

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

1-1

FY23-Services, F3G010/F3G080/DA720 RGSC Provide pest control services for the Rio Grande State Center State

910-59

1.00 LOT

15000.00000

Health and Human Services Commission

Purchase Order

Dispatch via Print Payment Terms Freight Terms Ship Via HHSTX-3-0000299277 Net 30 Prepaid & Allow BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Date Revision Page specifications, terms, and conditions set forth in the advertisement and vendor's 09/01/22 2 conforming responses become a part of this numbered purchase order. Contractor Ship To: 5070 - Harlingen: 1401 S Rangervill guarantees goods or services delivered meet or exceed numbered purchase order DEPARTMENT OF STATE HEALTH SERVICES requirements. 1401 S Rangerville Rd All shipments, shipping papers, invoices, and correspondence must be identified PO Box 2668 with our Purchase Order Number. Harlingen TX 78552 United States 14102315109 Bill To: Invoice-DSHS Accounts Pavable Vendor: HEALTH & HUMAN SERVICES COMMISSION ECOLAB INC P O BOX 70343 6711 S New Braunfels CHICAGO IL 60673-0343 Ste 100 San Antonio TX 78223 **United States** United States Fax: 210/531-7883 Email: SAHAccounting@dshs.texas.gov **Purchaser:** Lyncook, Shawn Patrick 512/406-2685 Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity UOM **PO Price** Extended Amt Due Date Hospital, State Supported Living Center and Outpatient Clinic Schedule Total \$15,000.00 \$15,000.00 Item Total for Line 1 \$15,000.00 **Total PO Amount**

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 Mall etc., ciem

08/25/2022