## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Te Net 30	rms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-3-0000299479
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			<b>Date</b> 09/01/22	Revision Page 1
guarantees g requirements All shipmen	responses become a part of this numbered oods or services delivered meet or exceed s. tts, shipping papers, invoices, and corre rchase Order Number.	numbered purchase order	Ship To:	4551 - Austin:4301 N Lamar Blvd HEALTH & HUMAN SERVICES COMMISSION 4301 N Lamar Blvd Austin TX 78751 United States
Vendor:	1854126496 8 CK THOMAS GROUP INC 1707 MAPLE VISTA DR SUITE C USA PFLUGERVILLE TX 78660-9474 United States		Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 4001 Highway 36 South Brenham TX 77833 United States
			Fax: Email:	979/277-1865 712Accounting@hhs.texas.gov
			Purchaser:	Munoz Gi hert .I

Quantity

**UOM** 

Class/Item

PO Price

Extended Amt

**Due Date** 

FY23 funding OM/Q Requisition 192916 - Solicitation 192916A PO Service Dates 09-01-2022 to 08-31-2023

Attached Terms and Conditions apply to this Purchase Order.

**Inventory Item ID - Line Description** 

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

Line-Sch

First and Last Name: Cynthia Thomas Phone number: 737-256-7770

Email address: Cynthia.thomas@austinfleetservices.com

Agency contact

First and Last Name: Thomas Chavez Phone number: 512-374-6566

Email address: Thomas.Chavez@hhs.texas.gov Facility: Austin State Supported Living Center

PCS contact

First and Last Name: Gilbert Munoz Phone number: 512-406-2473

Email address: Gi bert.Munoz@hhs.texas.gov

1-1	FY23-GOODS-Parts for light vehicles- DA711	060-66	1.00	LOT	12400.00000	\$12,400.00	09/01/2022
					Schedule Total	\$12,400.00	
					Item Total for Line 1 _	\$12,400.00	
2-1	FY23-SERVICE- Labor/parts for light	928-54	1.00	LOT	12400.00000	\$12,400.00	09/01/2022

FY23-SERVICE- Labor/parts for light vehicles as needed DA711

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Net 30	Prepaid & Allow	BEST WAY	Y	Purchase Ord	ler	<b>HHSTX-3-00</b>	00299479	
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.			<b>Date</b> 09/01/22	Revision		Page 2		
			Ship To:	Ship To:  4551 - Austin:4301 N Lamar Blvd HEALTH & HUMAN SERVICES COMI 4301 N Lamar Blvd Austin TX 78751 United States				
Vendor:	1854126496 8 CK THOMAS GROUP INC 1707 MAPLE VISTA DR SUITE C USA PFLUGERVILLE TX 78660-9474 United States			Bill To:	HEALTH & HU 4001 Highway 3	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 4001 Highway 36 South Brenham TX 77833 United States  979/277-1865 712Accounting@hhs.texas.gov		
				Fax: Email:	, , , , <u> </u>			
				Purchaser:	Munoz,Gi bert	J		
Line-Sch	<b>Inventory Item ID - Line Description</b>	Class/Item Qu	uantity	UOM	PO Price	Extended Amt	Due Date	
				S	chedule Total	\$12,400.00		
			Item Total for Line 2 \$12,400.		\$12,400.00			

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.

Payment Terms

Freight Terms

Authorized By

(AUMAN MMB), CTC.)

**Total PO Amount** 

08/28/2022

\$24,800.00