#### **Purchase Order**

**Dispatch via Print** 

| Payment Te                                                                                                                                                                                                                                                                                  | rms Freight Terms                                                                       | Ship Via |                |                                                                                                                                |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|----------|----------------|--------------------------------------------------------------------------------------------------------------------------------|--|
| Net 30                                                                                                                                                                                                                                                                                      | Prepaid & Allow                                                                         | BEST WAY | Purchase Order | HHSTX-3-0000299550                                                                                                             |  |
| 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       |          |                | 1                                                                                                                              |  |
| 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. |                                                                                         |          | Ship To:       | 6694 - Austin:1111 W North Loop<br>HEALTH & HUMAN SERVICES COMMISSION<br>1111 W North Loop<br>Austin TX 78756<br>United States |  |
| Vendor:                                                                                                                                                                                                                                                                                     | 1741976051 1<br>WORKQUEST<br>1011 E 53RD 1/2 ST<br>AUSTIN TX 787511703<br>United States |          | Bill To:       | Invoice-HHSC Accounting HEALTH & HUMAN SERVICES COMMISSION 4601 W Guadalupe St Austin TX 78751 United States                   |  |
|                                                                                                                                                                                                                                                                                             |                                                                                         |          | Fax:<br>Email: | 512/424-6901<br>HHSC_AP@hhsc.state.tx.us                                                                                       |  |
|                                                                                                                                                                                                                                                                                             |                                                                                         |          | Purchaser:     | Wells,Alicia N                                                                                                                 |  |

PO Price

**Extended Amt** 

**Due Date** 

**UOM** 

FY23 funding EX/0 - TGC 2155.441, Managed Term Contract 962-M3 Requisition 0000204985 PO Service Dates 09-01-2022 to 10-15-2022

**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.

Quantity

Class/Item

Texas District: 14

Line-Sch

Job classification: 1080

Job class title: Financial Analyst I

Job skill level: Expert Temp: Melanie Montez Hours per week: 40 Estimated hours: 250

#### JOB DESCRIPTION:

Asset Management Financial Analyst I, under the supervision of the HHSC Asset Manager, Financial Analyst performs asset record discrepancies. Updates and maintains agency property tracking systems. Maintains a current and accurate inventory record of all assets. Coordinates and schedules the reconciliation work for asset record correction and generates reports reflecting corrected asset balances. Trains agency staff in asset management reconciliation policies and annual financial reporting procedures. Administers financial processes, performs complex journey level financial analysis and regulatory work.

Analyzes and interprets state and federal statutes and regulations to resolve financial, accounting, and regulatory issues. Prepares high-quality written reports, briefing documents, and identifies appropriate response to discrepancies. Provide guidance to others and perform advanced data analysis in preparation for Asset Management accounting reconciliation activities. Develops, evaluates, and reviews reconciliation work to ensure compliance with business, financial, and/or regulatory policies, procedures, and processes. Works cooperatively and effectively on cross-functional teams and internal and external workgroups. Researches, analyzes, interprets, and summarizes complex financial, regulatory, and/or management information. Works under general supervision with moderate latitude for the use of initiative and independent judgment. Attends work on a regular and predictable schedule in accordance with agency leave policy.

Under the supervision of the HHSC Asset Manager, Financial Analyst performs journey moderately complex inventory work. Maintains accounting records for leased and state-owned property purchases, maintains inventory and asset control records, and performs tasks associated with the agency tagging system. Oversees warehouse operations related to storage and processing of HHS assets. Serves as the lead for inventory teams, conducts physical inventories, audits inventory results, and reconciles asset record discrepancies. Prepares and audits documentation for asset transfers and disposals. Updates and maintains agency property tracking systems. Maintains a current and accurate inventory record of all assets including surplus, obsolete, or damaged property. Coordinates and schedules the disposition of surplus property and generates reports reflecting items on hand. Trains agency staff in asset management policies and procedures, property inventory systems, surplus procedures, and annual inventory procedures. Conducts investigation on lost, stolen and damaged property items. Works under general supervision with limited latitude for the use of initiative and independent judgment.

### **Purchase Order**

**Dispatch via Print** 

| Payment Terms                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Freight Terms   | Ship Via |                      |                                                                                                                                | HHSTX-3-0000299550 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------|----------------------|--------------------------------------------------------------------------------------------------------------------------------|--------------------|
| Net 30                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Prepaid & Allow | BEST WAY | Purchase Order       |                                                                                                                                | HH31X-3-0000299330 |
| 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<br>2          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |          | Ship To:             | 6694 - Austin:1111 W North Loop<br>HEALTH & HUMAN SERVICES COMMISSION<br>1111 W North Loop<br>Austin TX 78756<br>United States |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |          |                      |                                                                                                                                |                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |          |                      |                                                                                                                                |                    |

Vendor: 1741976051 1

WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703

**United States** 

Bill To: Invoice-HHSC Accounting

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

**Fax:** 512/424-6901

Email: HHSC\_AP@hhsc.state.tx.us

Purchaser: Wells, Alicia N

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

Knowledge, Skills, and Abilities:

List the knowledge, skills, and abilities critical to performance in this position:

Knowledge of general asset management methods, practices, and procedures.

Knowledge of inventory and stock control record keeping.

Knowledge of automated inventory-control, purchasing, requisitioning, property, and accounting systems.

Knowledge of inventory control procedures.

Skill in use of computers and Microsoft Office suite of software.

Skill in problem solving and attention to detail.

Ability to manage time, organize workloads, set priorities, and carry out assigned tasks in a timely manner.

Ability to work cooperatively with others and deal with stressful situations in a diplomatic and tactful manner.

Ability to effectively communicate both verbally and in writing.

Ability to maintain effective relationships with general public and employees.

Ability to perform clerical tasks independently.

Ability to maintain automated and hard copy filing systems.

Ability to use PeopleSoft, Comptroller of Public Accounts, and other inventory control and fixed-asset systems.

Ability to perform and interpret numerical analysis.

Ability to interpret statutes.

Ability to analyze and summarize financial and management records for accuracy and conformance to procedures, rules, and regulations.

Ability to prepare reports and correspondence regarding findings.

Service Period

Start Date: 09/01/2022 End Date: 10/15/2022

Hours: 8:00AM to 5:00PM Days per week: Monday-Friday

Department: Asset Management Office

Street Address of Work Location: 4601 W. Guadalupe St.

City/State/Zip: Austin, TX. 78751

Bldg/Room#: North Austin Complex 2nd Floor room 2.104

Supervisor Contact (Time card approval/resume reviewer/interviewer): Monica Reyes Phone: 512-745-1853

Email: monicay.reyes@hhs.texas.gov Agency Contact: Rachel Jones

Phone: 737-867-7119

Email: Rachel.jones@hhs.texas.gov

Additional/Alternate Contact Name: Chris Bergstrom

Phone: 737-210-0429

Email: chris.bergstrom@hhs.texas.gov

Vendor: WorkQuest Address: 1011 E 53 1/2 St

Austin, TX 78751

### **Purchase Order**

**Dispatch via Print** 

| Payment Te<br>Net 30                                                                                                                                                | rms Freight Terms Prepaid & Allow                                                                                                                                                                                                                                                           | <b>Ship Via</b><br>BEST WAY | Purchase Order       | HHSTX-3-0000299550                                                                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------|
| 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 3                                                                                                                |
| guarantees grequirements All shipmen                                                                                                                                | 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. |                             |                      | 6694 - Austin:1111 W North Loop<br>HEALTH & HUMAN SERVICES COMMISSION<br>1111 W North Loop<br>Austin TX 78756<br>United States |
| Vendor:                                                                                                                                                             | 1741976051 1<br>WORKQUEST<br>1011 E 53RD 1/2 ST<br>AUSTIN TX 787511703<br><b>United States</b>                                                                                                                                                                                              |                             | Bill To:             | Invoice-HHSC Accounting<br>HEALTH & HUMAN SERVICES COMMISSION<br>4601 W Guadalupe St<br>Austin TX 78751<br>United States       |
|                                                                                                                                                                     |                                                                                                                                                                                                                                                                                             |                             | Fax:<br>Email:       | 512/424-6901<br>HHSC_AP@hhsc.state.tx.us                                                                                       |
|                                                                                                                                                                     |                                                                                                                                                                                                                                                                                             |                             | Purchaser:           | Wells,Alicia N                                                                                                                 |

Supplier/Payee ID: 1741976051

CPA ID#: 84202

Line-Sch

Contact: Karin Wilcox, State Account Coordinator

**Inventory Item ID - Line Description** 

Phone: 737-209-7290

Email: karin.wilcox@gsgtalentsolutions.com

 $CC: garrett.wilson@gsgtalentsolutions.com \ and \ tempservicepo@workquesttx.com$ 

Class/Item

PCS Purchasing contact Alicia Wells 512-406-2582 Alicia.Wells@hhs.texas.gov

Per contract at no additional charge, we request a standard DPS criminal history check. However, criminal background checks, which utilize sources other than or in addition to DPS and for areas beyond Texas, are available upon request at an additional fee of \$25.00 for each personnel. This additional charge should be included on the purchase order as requested.

Quantity

**UOM** 

 Item Total for Line 1
 \$15,857.50

PO Price

Extended Amt

**Due Date** 

**Total PO Amount** \$15,857.50

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.

# **Purchase Order**

**Dispatch via Print** 

| Payment Ter                                                                       | ms Freight Terms                                                                | Ship Via |                | 1110TV 0 000000550                                                                   |  |
|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------------|----------|----------------|--------------------------------------------------------------------------------------|--|
| Net 30                                                                            | Prepaid & Allow                                                                 | BEST WAY | Purchase Order | HHSTX-3-0000299550                                                                   |  |
| 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       | 4                                                                                    |  |
|                                                                                   | conforming responses become a part of this numbered purchase order. Contractor  |          |                | 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop |  |
| requirements.                                                                     | guarantees goods or services delivered meet or exceed numbered purchase order   |          |                |                                                                                      |  |
|                                                                                   | All shipments, shipping papers, invoices, and correspondence must be identified |          |                |                                                                                      |  |
| with our Purchase Order Number.                                                   |                                                                                 |          |                | Austin TX 78756<br>United States                                                     |  |
|                                                                                   |                                                                                 |          |                | Cinica battos                                                                        |  |
| Vendor:                                                                           | 1741976051 1                                                                    |          | Bill To:       | Invoice-HHSC Accounting                                                              |  |
|                                                                                   | WORKQUEST                                                                       |          |                | HEALTH & HUMAN SERVICES COMMISSION                                                   |  |
|                                                                                   | 1011 E 53RD 1/2 ST<br>AUSTIN TX 787511703                                       |          |                | 4601 W Guadalupe St<br>Austin TX 78751                                               |  |
|                                                                                   | United States                                                                   |          |                | United States                                                                        |  |
|                                                                                   | Cinica States                                                                   |          |                | Clifical States                                                                      |  |
|                                                                                   |                                                                                 |          |                |                                                                                      |  |
|                                                                                   |                                                                                 |          |                |                                                                                      |  |
|                                                                                   |                                                                                 |          | Fax:           | 512/424-6901                                                                         |  |
|                                                                                   |                                                                                 |          | Email:         | HHSC_AP@hhsc.state.tx.us                                                             |  |
|                                                                                   |                                                                                 |          |                |                                                                                      |  |
|                                                                                   |                                                                                 |          | Purchaser:     | Wells.Alicia N                                                                       |  |

Quantity

UOM

Class/Item

Line-Sch Inventory Item ID - Line Description

**Authorized By** 

PO Price

Slicia Wells, CTCD, CTCM

08/29/2022

Extended Amt Due Date