## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Terms Net 30	Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-3	-0000299942	
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		
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.			Ship To:	4038 - Corpus Christi:902 Airport HEALTH & HUMAN SERVICES COMMISSION 902 Airport Rd		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Corpus Christi TX 78405 United States			
Vendor:	1742551787 1		Bill To:	Invoice - DADS		

JIMSON INC

DBA ALL BRAND SALES SERVICE 5001 AMBASSADOR ROW CORPUS CHRISTI TX 784162103

**United States** 

HEALTH & HUMAN SERVICES COMMISSION

4001 Highway 36 South Brenham TX 77833 United States

Fax: 979/277-1865

712Accounting@hhs.texas.gov **Email:** 

512/406-2548 Klepfer, Vincent Michael **Purchaser:** Line-Sch **Inventory Item ID - Line Description** Class/Item **UOM** Quantity PO Price Extended Amt **Due Date** 

Goods and/or services are to be delivered and invoiced after September 1, 2022

This contract is contingent upon the continued availability of lawful appropriations by the Texas Legislature.

VENDORS SEND INVOICES VIA EMAIL TO: 712accounting@hhs.texas.gov

Lead Contact (Program SME) Name: RICHARD CASTANEDA Lead Contact Email: Richard.castaneda@hhs.texas.gov

Lead Contact Phone: 361-888-5301

Contract Manager Name: CHRISTINE CRUZ Contract Manager Email: christine.cruz@hhs.texas.gov Contract Manager Phone: 361-888-5301 ext 7507

SCOR Division: 19 - State Operated Facilities

Initial Contract Term:

Any contract resulting from this Solicitation will have an initial term beginning September 1, 2022 and expiring August 31, 2023.

24-Hour Contacts for JIMSON:

Mike Hammer 361-438-7404 Mike.Hammer@kmcmail.com

Lisa Hammer 361-851-1002 lhammer851@aol.com

1-1 931-30 1.00 LOT 30000.00000 \$30,000.00 09/01/2022

FY23 SERVICES KITCHEN **EQUIPMENT** REPAIR/MAINTENANCE CH3

**CCSSLC** 

Item Total for Line 1 \$30,000.00

\$30,000.00

Schedule Total

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Vendor:	1742551787 1 JIMSON INC DBA ALL BRAND SALES SERVICI 5001 AMBASSADOR ROW CORPUS CHRISTI TX 784162103 <b>United States</b>	IIMSON INC DBA ALL BRAND SALES SERVICE 5001 AMBASSADOR ROW CORPUS CHRISTI TX 784162103		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:	Klepfer,Vincent Michael 512/406-2548	
Line-Sch	Inventory Item ID - Line Description	Class/Item Quant	tity UOM	PO Price Extended Amt Due Date	

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

michael Klupbur

CTPM

Total PO Amount

08/31/2022

\$30,000.00