## Health and Human Services Commission

## Purchase Order

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Payment To	rms Freight Terms	Ship Via				2.004	
Net 30         Prepaid & Allow           If advertised by informal bid, Invitation for Offer, or Request for		BEST WAY uest for Proposal; all		Purchase Order Date	HHSTX-3-0000300473 Revision Page		
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			09/01/22 Ship To:	1 - 9/15/2022       1         0091 - Angleton:1504 E Mulberry St       1         DEPT FAMILY AND PROTECTIVE SERVICES			
requirements. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				1504 E Mulberry St Angleton TX 77515 United States			
Vendor:	1273067004 4 WORNAT CAPITAL LP 207 CRAIK ST MARLIN TX 766612816 <b>United States</b>			Bill To:	Invoice-HHSC Fii HEALTH & HUM 5425 Polk St PO Box 16017 Ste 220 Houston TX 7702 United States	MAN SERVICES CO	DMMISSION
				Fax: Email:	713/767-2488 Reg_06_Regional	L_Budget_PRF@hhso	c.state.tx
				Purchaser:	Lazare-Payne,R	losalvn D 51	12/406-2402
Line-Sch	Inventory Item ID - Line Description	Class/Item Qu	antity	UOM	PO Price	Extended Amt	Due Date
TGĊ CHAP PCS CONT Rosalyn La: 512-406-24 rosalyn.laza Contract Ma Shekima Flu 713-767-24	X/0 # 0000205712 TER 2167. LEASE OF SPACE FOR ST/ ACT zare-Payne 02 ire-payne@hhs.texas.gov anager eary	ATE AGENCIES					
1-1	R06_FY23 Lease - 1504 East Mulberry Street, Angleton FY <sub>6</sub> 22 PO #HHSTX-2- 265267	971-35	1.00		643.00000	\$283,643.00	09/15/2022
					dule Total for Line 1		
					O Amount	\$283,643.00	

## **Health and Human Services Commission**

## **Purchase Order**

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Payment T Net 30	Yerms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-	3-0000300473
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	<b>Revision</b> 1 - 9/15/2022	<b>Page</b> 2
			Ship To:	0091 - Angleton:1504 E Mulberry St DEPT FAMILY AND PROTECTIVE SERVICES 1504 E Mulberry St Angleton TX 77515 United States	
Vendor:	1273067004 4 WORNAT CAPITAL LP 207 CRAIK ST MARLIN TX 766612816 <b>United States</b>		Bill To:	Invoice-HHSC Financial Servic HEALTH & HUMAN SERVIC 5425 Polk St PO Box 16017 Ste 220 Houston TX 77023 United States	•
			Fax: Email:	713/767-2488 Reg_06_Regional_Budget_PRF	@hhsc.state.tx
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	Purchaser: UOM	Lazare-Payne,Rosalyn D PO Price Extended	512/406-2402 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	
Realize Legene - Payme CTCD	<u>09/15/2022</u>

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