## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Terms Net 30	s Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-000030065	8
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> 09/20/22	Revision Pag	<b>је</b> 1
guarantees good requirements.	forming responses become a part of this numbered purchase order. Contractor rantees goods or services delivered meet or exceed numbered purchase order uirements.  shipments, shipping papers, invoices, and correspondence must be identified h our Purchase Order Number.			2020 - Austin:1100 W 49th St (DHSB HEALTH & HUMAN SERVICES COMMISSION 1100 W 49th St (DHSB) Austin TX 78756 United States	
Vendor:	3304304304 2 TEXAS COMPTROLLER OF PUBL 111 E 17TH ST AUSTIN TX 787740001 United States	IC ACCOUNTS	Bill To:	Invoice-HHSC Accounting HEALTH & HUMAN SERVICES COMMISSION 4601 W Guadalupe St Austin TX 78751 United States	
			Fax: Email:	512/424-6901 HHSC_AP@hhsc.state.tx.us	

Quantity

**Purchaser:** 

**UOM** 

Martinez, David

Extended Amt

**Due Date** 

PO Price

FY23 funding

Class/Item

EX/0 TGC 771

Requisition 206473

PO Service Dates 09/20/2022 to 08-31-2023

CTCD Course - Mia Jiminian

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

Texas Comptroller of Public Accounts

Phone: 512-463-5355 Email: ctp@cpa.texas.gov

Agency contact Mia Jiminian

Email: mia.jiminian@hhs.texas.gov

PCS contact David Martinez Phone: 512-406-2597

Email: David.Martinez01@hhs.texas.gov CTCD Course Registration-Mia Jiminian

## **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-3-0000300658
specification	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.			Revision Page 2
guarantees go requirements All shipmen				2020 - Austin:1100 W 49th St (DHSB HEALTH & HUMAN SERVICES COMMISSION 1100 W 49th St (DHSB) Austin TX 78756 United States
Vendor:	3304304304 2 TEXAS COMPTROLLER OF PUBI 111 E 17TH ST AUSTIN TX 787740001 United States	LIC ACCOUNTS	Bill To:	Invoice-HHSC Accounting HEALTH & HUMAN SERVICES COMMISSION 4601 W Guadalupe St Austin TX 78751 United States
			Fax: Email:	512/424-6901 HHSC_AP@hhsc.state.tx.us
			Purchaser:	Martinez,David

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.

Quantity

UOM

PO Price

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.

Class/Item

Line-Sch

**Inventory Item ID - Line Description** 

**Authorized By** 

09/20/2022

**Extended Amt** 

**Due Date**