Health and Human Services Commission

Purchase Order

Dispatch via Print

512/406-2622

Extended Amt Due Date

\$0.26

ns Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order		0000301097
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.		Date 09/26/22	Revision	Page 1
		Ship To:	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States	
endor: 1450477836 7 INFORMATION FIRST INC 8605 LENFANT PL MANASSAS VA 201122434 United States		Bill To: Invoice-HHSC Accounting HEALTH & HUMAN SERVICES CO 4601 W Guadalupe St Austin TX 78751 United States		OMMISSION
		Fax: Email:	512/424-6901 HHSC_AP@hhsc.state.tx.us	
,	Prepaid & Allow rinformal bid, Invitation for Offer, or I terms, and conditions set forth in the ac ponses become a part of this numbered ds or services delivered meet or exceed shipping papers, invoices, and corre hase Order Number. 1450477836 7 INFORMATION FIRST INC 8605 LENFANT PL MANASSAS VA 201122434	Prepaid & Allow BEST WAY rinformal bid, Invitation for Offer, or Request for Proposal; all terms, and conditions set forth in the advertisement and vendor's ponses become a part of this numbered purchase order. Contractor ds or services delivered meet or exceed numbered purchase order shipping papers, invoices, and correspondence must be identified hase Order Number. 1450477836 7 INFORMATION FIRST INC 8605 LENFANT PL MANASSAS VA 201122434	Prepaid & Allow BEST WAY Purchase Order rinformal bid, Invitation for Offer, or Request for Proposal; all terms, and conditions set forth in the advertisement and vendor's ponses become a part of this numbered purchase order. Contractor ds or services delivered meet or exceed numbered purchase order Shipping papers, invoices, and correspondence must be identified hase Order Number. Bill To: Bill To: Fax:	Prepaid & Allow BEST WAY Finformal bid, Invitation for Offer, or Request for Proposal; all terms, and conditions set forth in the advertisement and vendor's ponses become a part of this numbered purchase order. Contractor dis or services delivered meet or exceed numbered purchase order Shipping papers, invoices, and correspondence must be identified mase Order Number. 1450477836 7 INFORMATION FIRST INC 8605 LENFANT PL MANASSAS VA 201122434 United States Fax: 512/424-6901

Purchaser:

UOM

Powell, Kenneth J

PO Price

Item Total for Line 1

FY23 Funding

Line-Sch

Requisition 202536 Quote: IFRQ-440740

PO Service Dates 09/26/22 Until 08/31/2023

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

Purchase order issued in accordance with Texas Government Code §2157.068, PCS-111

Class/Item

Vendor Information:

Vendor: Information First, Inc. Vendor ID: 1450477836 Contact Name: Christina Bruno Email: cbruno@info-first.com Phone: (703) 508-5882

Agency POC Information Contact Name: Keith Dickens

Email: Keith.Dickens@hhsc.state.tx.us sunny.martinez@hhs.texas.gov

Phone: (512) 438-2420

Purchaser

Contact: Kenneth J Powell Sr

Email: kenneth.powell@hhs.texas.gov

1-1	FY23 Information First Maintenance	208-61	1.00	EA	.26000	\$0.26	09/26/2022
					Schedule Total	\$0.26	-

Health and Human Services Commission

Purchase Order

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000301097	HSTX-3-00	H	chase Order	Pur	VAY	BEST	Prepaid & Allow	Net 30
Page 2		Revision	al bid, Invitation for Offer, or Request for Proposal; all de conditions set forth in the advertisement and vendor's 09/26/22		advertised by informal bid, Invitation for Offer, or Request for Proposal; all pecifications, terms, and conditions set forth in the advertisement and vendor's		specifications, ter	
6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756			Ship To:		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.			
OMMISSION	N SERVICES CO	United States Invoice-HHSC According HEALTH & HUMA 4601 W Guadalupe Solution TX 78751 United States	То:	Bill			vendor: 1450477836 7 INFORMATION FIRST INC 8605 LENFANT PL MANASSAS VA 201122434 United States	
	ate.tx.us	512/424-6901 HHSC_AP@hhsc.sta	Fax: Email:					
2/406-2622		Powell,Kenneth J	chaser:					
Due Date	Extended Amt	PO Price		UOM	Quantity	Class/Item	nventory Item ID - Line Description	Line-Sch Inv
09/26/2022	\$487.32	81.22000		EA	6.00	208-61	Content Manager Rendering SW E-LTU- usiness Support SP-AL261	
	\$487.32	dule Total	Schee					
	\$487.32	for Line 2	Item Total f					
09/26/2022	\$7.36	7.36000		EA	1.00	208-61	dministrator User Migration SW E- TU-Business Support	
	\$7.36	dule Total	Scheo					
	\$7.36	for Line 3	Item Total f					
09/26/2022	\$94.42	94.42000		EA	1.00	208-61	Content Manager Rendering SW E-LTU- usiness Support SP-AL261	4-1 Co Bu
	\$94.42	dule Total	Scheo					
	\$94.42	for Line 4	Item Total f					
	\$589.36	O Amount	Total PO					

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.

Health and Human Services Commission

Purchase Order

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Payment Te	8	Ship Via		LUICT	V 2 0000204007
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	ннэт	X-3-0000301097
	by informal bid, Invitation for Offer, or R		Date	Revision	Page
	s, terms, and conditions set forth in the ad		09/26/22		3
guarantees go requirements All shipmen	responses become a part of this numbered bods or services delivered meet or exceed ts, shipping papers, invoices, and corre rchase Order Number.	numbered purchase order	Ship To:	6694 - Austin:1111 W Nort HEALTH & HUMAN SER 1111 W North Loop Austin TX 78756 United States	
Vendor: 1450477836 7 INFORMATION FIRST INC 8605 LENFANT PL MANASSAS VA 201122434 United States			Bill To:	Invoice-HHSC Accounting HEALTH & HUMAN SERV 4601 W Guadalupe St Austin TX 78751 United States	VICES COMMISSION
			Fax: Email:	512/424-6901 HHSC_AP@hhsc.state.tx.us	3
			Purchaser:	Powell,Kenneth J	512/406-2622

Quantity

Class/Item

Line-Sch

Inventory Item ID - Line Description

Authorized By

PO Price

Kenneth J. Powell Sr

UOM

09/26/2022

Extended Amt Due Date