Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHST	X-3-0000301478
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			Date 09/29/22	Revision	Page 1
guarantees goods or requirements.	es become a part of this numbered services delivered meet or exceed ping papers, invoices, and corre Order Number.	numbered purchase order	Ship To:	2112 - Austin:909 W 45th St (DHB) HEALTH & HUMAN SERVICES COMMISSIO 909 W 45th St (DHB) Ste 271 Austin TX 78751 United States	

Vendor: 1900999880 8

SOUTH CENTRAL SUPPLY LLC

828 BETTERMAN DR

PFLUGERVILLE TX 786605117

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: Reese,Travis

Line-Sch Inventory Item ID - Line Description Class/Item Quantity UOM PO Pr	rice Extended Amt Due Date
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FY23 Purchase

-

Procurement Type: SP / E Requisition: 0000207982

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Agency Contact: Name: Natasha Morfin

Phone: NA

Email: natasha.morfin@hhs.texas.gov

Purchaser Information: Name: Travis Reese Phone: (832) 212-9330

Email: travis.reese@hhs.texas.gov

Vendor: South Central Supply Vendor Contact: Customer Service Vendor Phone: (512) 367-0311 Email: sales@supplytexas.com

-

Quote#: Q13942

-

Include P.O. Number on packing Slips, Cartons, Packages,

Bundles, ETC.

Freight: F.O.B. Destination Freight Prepaid Allowed

Terms: Net 30

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding.

Invoice per 34 TAC §20.487, amended effective May 1, 2022

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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			Date 09/29/22	Revision Page 2		
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:	2112 - Austin:909 W 45th St (DHB) HEALTH & HUMAN SERVICES COMMISSION 909 W 45th St (DHB) Ste 271 Austin TX 78751 United States			
, 0114011	1900999880 8		Bill To:	Invoice-HHSC Accounting		

SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117

United States

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: Reese, Travis Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity **UOM PO Price Extended Amt Due Date** 1-1 080-57 4.00 CS 151.99000 \$607.96 09/30/2022 300 Pack Clear Large Acrylic Ice Bead Vase Fillers Table Decoration - Case of 20 bags \$607.96 Schedule Total Item Total for Line 1 \$607.96 2-1 080-57 4.00 CS 88.99000 \$355.96 09/30/2022 Pack of 6 - 10" Round Glass Mirror-Case of 6 packs-Total 36 mirrors Schedule Total \$355.96 \$355.96 Item Total for Line 2 Total PO Amount \$963.92

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

Lariz Rasse, CTCD, CTCM

09/29/2022