Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via		LUIOT	V 0 0000001740	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSI	X-3-0000301712	
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 10/03/22	Revision Page		
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:	hip To: 3027 - Austin:701 W 51st St HEALTH & HUMAN SERVICES COMMISSION 701 W 51st St		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				PO Box 13247 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: Evans, Jocelynn

Line-Sch Inventory Item ID - Line Description Class/Item Quantity UOM PO Price Extended Amt Due Date

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: 14 Days After Receipt of PO

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday - Friday except designated State Holidays

AGENCY CONTACT: Joseph Scott Siegel scott.siegel@hhs.texas.gov

HHSC BUYER:

Name: Jocelynn Evans

Email: jocelynn.evans@hhs.texas.gov

Phone: 512-776-6233

VENDOR:

South Central Supply 828 Betterman Drive Pflugerville Texas 78660 VID: 1900999880800 sales@supplytexas.com

(512) 367-0311

QUOTE # Q13937

PURCHASING METHOD: SP/E

Not to Exceed \$10,000.00

REQUIREMENTS/LIMITATIONS:

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2022 funding.

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

Requisition 208367

Health and Human Services Commission

Purchase Order

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Net 30	Prepaid & Allow	BEST WAY	Purchase Order	ппот	K-3-0000301712	
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4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

Purchaser: Evans, Jocelynn Extended Amt Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity **UOM** PO Price **Due Date** 340-28 1-1 1.00 EΑ 23.00000 \$23.00 10/17/2022 Fire extinguisher Schedule Total \$23.00 Fire extinguisher; see attached for quote Item Total for Line 1 \$23.00 615-60 1.00 EA 12.03000 2-1 \$12.03 10/17/2022 Snack bags Schedule Total \$12.03 Ziploc snack bags; see attached for quote Item Total for Line 2 \$12.03 Total PO Amount \$35.03

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						
Jocelynn Evans	10/03/2022					