

# Health and Human Services Commission

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000301751</b>
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.			<b>Date</b> 10/03/22
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> Page 1
			<b>Ship To:</b> 6689 - Brenham:4001 S Hwy 36 HEALTH & HUMAN SERVICES COMMISSION 4001 S Hwy 36 Brenham TX 77833 United States

**Vendor:** 1201946031 5  
MEDLINE INDUSTRIES HOLDINGS LP  
1 MEDLINE PL  
MUNDELEIN IL 600604485  
United States

**Bill To:** Invoice - DADS  
HEALTH & HUMAN SERVICES COMMISSION  
4001 Highway 36 South  
Brenham TX 77833  
United States

**Fax:** 979/277-1865  
**Email:** 712Accounting@hhs.texas.gov

**Purchaser:** Tello,Samantha Danielle

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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\*\* VENDORS SEND INVOICES VIA EMAIL TO: 712Accounting@hhs.texas.gov \*\*

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 DELIVERY CONTACT:  
Name: Susan M. Washington  
Phone: 979-277-1432 (or) 979-200-1701  
Email: Susan.Washington@hhs.texas.gov

HHSC BUYER:  
Name: Samantha Tello  
Phone: 512-776-6159  
Email: Samantha.tello@hhs.texas.gov

VENDOR:  
VID: 12019460315  
Vendor Name: Medline Industries Holdings LP  
Vendor Address: 1 Medline Pl.  
Vendor City Zip: Mundelein, IL 60060-4485  
Vendor Contact: Holly Carner  
Vendor Contact Phone: 281-245-4312  
Vendor Contact Email: HCarner@medline.com

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. FY2023 funding.

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

Requisition: 0000207221  
NIGP: 475-21  
Quote: S6126

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MATTRESS SYSTEMS: PUMP FOR  
MDT24SUPRAAPL  
Item #: MDT24APLPUMP

**Schedule Total** \_\_\_\_\_ \$217.62  
**Item Total for Line 1** \_\_\_\_\_ \$217.62  
**Total PO Amount** \$217.62

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.

<b>Authorized By</b> <i>Samantha Tello, CTCD, CTCM</i>	<b>10/03/2022</b>
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