## **Health and Human Services Commission**

### **Purchase Order**

Dispatch via Print

#### TX SmartBuy PO ID 23008785

Payment Te		Ship Vi	a				
Net 30	Prepaid & Allow	BEST W	VAY	Purchase Order	H	HSTX-3-000	0301872
	by informal bid, Invitation for Offer, or Re			Date	Revision		Page
	s, terms, and conditions set forth in the adv			10/04/22			1
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:	4547 - Wichita Falls:6515 Kemp Blv HEALTH & HUMAN SERVICES COMMISS 6515 Kemp Blvd PO Box 300 Wichita Falls TX 76308 United States		MISSION	
Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 <b>United States</b>			Bill To:	Terrell SH Whse HEALTH & HUMAI 1200 E Brin PO Box 70 Terrell TX 75160 United States	N SERVICES COM	MISSION
				Email:	DSHS.TSHBusiness(	Office@dshs.texas.g	ov
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	Purchaser: UOM	Chavez,Rafael	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: 5-30 Days from receipt of PO

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday - Friday except designated State Holidays when the Warehouse is closed. Please call Agency Delivery Contact to schedule delivery 24 hours prior to arrival.

AGENCY DELIVERY CONTACT: NTSH-Wichita Falls Stacy Ward 940-689-5311 stacy.ward@hhs.texas.gov

HHSC BUYER: Steven Chavez, CTCD, 512-712-5002 Rafael.chavez@hhs.texas.gov

VENDOR: Customer Service 512-451-8145 customerservice@workquest.com

PURCHASING METHOD: EX-0 Term: 365-S1, 832-S1, 615-S1, 485-S1 Contract Term: 11/16/2021 - 11/30/2026 Smartbuy PO: 23008785

REQUIREMENTS/LIMITATIONS: This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature.

Requisition #: MIM2302051; Line(s)#: 7, 13, 15, 17, 26, 35

1-1	450-06-10010-7 BATTERY D ULTPRO 96/CS RAYVC WRKQST 45006100107	450-06	12.00	CS	107.48000	\$1,289.76	10/10/2022
					Schedule Total	\$1,289.76	
					Item Total for Line 1	\$1,289.76	

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Payment To Net 30	erms Freight Terms Prepaid & Allow	Ship V BEST		Pur	rchase Order		HHSTX-3-0	00030187	
If advertised	by informal bid, Invitation for Offer, or Request for Proposal; all is, terms, and conditions set forth in the advertisement and vendor's		Dat		Revision		Pa		
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						Wichita Falls TX 76308 United States			
Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 <b>United States</b>					Terrell SH Whse HEALTH & HUMAN SERVICES COMMISSION 1200 E Brin PO Box 70 Terrell TX 75160 United States			
					Email:	DSHS.TSHBus	inessOffice@dshs.texa	s.gov	
				Pur	chaser:	Chavez,Rafae	91		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM		PO Price	Extended Amt	Due Date	
2-1	485-16-30100-7 CLEANER CARPET SPT RMVR 250Z WRKQST 3/CS SQZ BTL	485-16	10.00	CS		48.28000	\$482.80	10/14/2022	
					Sched	ule Total	\$482.80		
					Item Total fo	or Line 2	\$482.80		
3-1	615-15-07450-5A 2023 APPT PLN MNTHLY 8X11 WRKQST 61515074505	615-15	500.00	EA		12.69000	\$6,345.00	10/18/2022	
					Sched	ule Total	\$6,345.00		
					Item Total fo	or Line 3	\$6,345.00		
4-1	615-19-13077-9A 2023 CALENDAR DSK PD 22X17 WRKQST 61519130779	615-19	528.00	EA		8.49000	\$4,482.72	10/18/2022	
					Sched	ule Total	\$4,482.72		
					Item Total fo	or Line 4	\$4,482.72		
5-1	832-20-11200-0 TAPE CLR RFL 3/4IN 6/PKG WRKQST 83220112	832-20	30.00	PKG		6.56000	\$196.80	10/18/2022	
					Sched	ule Total	\$196.80		
					Item Total fo	or Line 5	\$196.80		
				DV		23.51000	\$705 30	11/03/2022	
6-1	365-10-62180-2 PAD FLOOR BUFF GRY 19IN 5/BX WRKQST 36510621802	365-10	30.00	БЛ		23.51000	<i>\$105.50</i>		
6-1	PAD FLOOR BUFF GRY 19IN 5/BX	365-10	30.00	БЛ		ule Total			

# Health and Human Services Commission

### **Purchase Order**

#### TX SmartBuy PO ID 23008785

Payment To Net 30	erms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-3-0000301872
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.			<b>Date</b> 10/04/22	Revision Page 3
			Ship To:	4547 - Wichita Falls:6515 Kemp Blv HEALTH & HUMAN SERVICES COMMISSION 6515 Kemp Blvd PO Box 300 Wichita Falls TX 76308 United States
Vendor: 1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States			Bill To:	Terrell SH Whse HEALTH & HUMAN SERVICES COMMISSION 1200 E Brin PO Box 70 Terrell TX 75160 United States
			Email:	DSHS.TSHBusinessOffice@dshs.texas.gov
			Purchaser:	Chavez,Rafael
Line-Sch	<b>Inventory Item ID - Line Description</b>	Class/Item Quantity	UOM	PO Price Extended Amt Due Date
			Total P	O Amount \$13,502.38

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.



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