Health and Human Services Commission

Purchase Order

			- 1	Dispatc	h via Print	
Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-000	0301910	
If advertised by info specifications, terms	rmal bid, Invitation for Offer, or s, and conditions set forth in the a	Request for Proposal; all dvertisement and vendor's	Date 10/04/22	Revision	Page 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 COMMISSION 6515 Kemp Blvd PO Box 300 Wichita Falls TX 76308 United States		
STAPI DBA S PO BO DALL	43390816 6 APLES CONTRACT AND COM BA STAPLES BUSINESS ADVA BOX 660409 ALLAS TX 75266 ited 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.g	gov	
			Purchaser:	Arnold,Valerie		
Line-Sch Inven	tory Item ID - Line Description	n Class/Item Quantity	UOM	PO Price Extended Amt	Due Date	
	Destination Freight Prepaid A s After Receipt of PO	llowed				
		-4:30 PM Monday - Friday exce	ept designated State I	Holidays		
Lead Contact Ema	CT: gram SME) Name: Joshua Do iil: joshua.dominguez1@hhs.t ne: 940-689-5266					
Contract Manager	Name: Drew Hardy, CTCM Email: drew.hardy2@hhs.tex Phone: 940-552-4055	as.gov				
****Warehouse: P	lease deliver to Food Service	- Joshua Dominguez****				
Office: 512-776-73 valerie.arnold@hh	Contracting Services					
Contact Name: Jo Email: jonathan.m Phone: (210) 253-	s Contract Commercial LLC nathan McEwen cewen@staples.com					

Email: jonathan.mcewen@staples.com Phone: (210) 253-7267 Alternate Contact Name: Customer Service Alternate Email: support_ct@staples.com Alternate Phone: (800) 574-7477

Health and Human Services Commission

Purchase Order

		i di cità			Dispa	tch via Prin
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ST. DB PO DA	43390816 6 APLES CONTRACT AND COM 3A STAPLES BUSINESS ADVAI 9 BOX 660409 ALLAS TX 75266 hited States		Bill To:	United States Terrell SH Whse HEALTH & HUN 1200 E Brin PO Box 70 Terrell TX 75160 United States	OMMISSION	
			Email:	DSHS.TSHBusin	essOffice@dshs.texa	ls.gov
			Purchaser:	Arnold, Valerie		
Line-Sch Inver	ntory Item ID - Line Description	Class/Item Quant	iity UOM	PO Price	Extended Amt	Due Date
Address: 500 Stap	bles Drive Framingham MA 017	02				
PURCHASING M	ETHOD: CP/X					
Procurement meth	nods were evaluated, and the be	est value is provided using	g the TXMAS contract.			
Txmas Contract: 1	TXMAS-20-7502					
Smartbuy PO: 230	008828					
REQUIREMENTS	/LIMITATIONS:					
This PO is conting	ent upon the continued availab	ility of lawful appropriatior	ns by the Texas Legislatur	e. FY2023 funding	g.	
Invoice per 34 TA	C §20.487, amended effective N	May 1, 2022				
Requisition 00002	07261					
F3E F2700	*****	*****	*****	****		
PCS PLEASE CO	NTACT Joshua Dominguez 940	0-689-5266 FOR QUESTI	ONS.			
** VENDORS SEM	ND INVOICES VIA EMAIL TO **	* joshua.dominguez1@hl	hs.texas.gov			
SCOR Division: 1	9 - State Operated Facilities					
PCS Email PO to:						
joshua.dominguez drew.hardy2@hhs dawna.fulford@hh stacy.ward@hhs.t james.hess1@hhs patrick.elias@hhs	s.texas.gov ns.texas.gov exas.gov s.texas.gov					
1-1 Astro	brights Multipurpose Paper 24 Lbs		.00 RM	6.44000	\$64.40	10/15/2022

Astrobrights Multipurpose Paper 24 Lbs 8.5 x 11 Solar Yellow 500/Pack (22531); Item # 491164

Health and Human Services Commission

Purchase Order

						Dispa	tch via Print	
Payment Terms Net 30	s Freight Terms Prepaid & Allow	Ship Vi BEST W		Purchase Order		HHSTX-3-00	00301910	
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 10/04/22	Revision		Page 3			
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	043390816 6 TAPLES CONTRACT AND COMMERCIAL LI DBA STAPLES BUSINESS ADVANTAGE O BOX 660409 OALLAS TX 75266 J nited States			Bill To:	Terrell SH Whse HEALTH & HUMAN SERVICES COMMI 1200 E Brin PO Box 70 Terrell TX 75160 United States		DMMISSION	
				Email:	DSHS.TSHE	S.TSHBusinessOffice@dshs.texas.gov		
				Purchaser:	Arnold,Vale			
Line-Sch In	ventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
				Schee	dule Total	\$64.40		
				Item Total for Line 1		\$64.40		
				Total PC	O Amount	\$64.40		

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 VWUKU ARNAD, CTCD, CTCM

<u>10/04/2022</u>