## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Te Net 30	erms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-0000302825		
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.			Date 10/14/22	RevisionPag1933 - Austin:4616 W Howard LnHEALTH & HUMAN SERVICES COMMISSION4616 W Howard LnSte 840Austin TX 78728United States		
			Ship To:			
Vendor:	1741860930 5 WESTMORELAND PLUMBING INC PO BOX 90966 AUSTIN TX 787090966 <b>United States</b>		Bill To:	Invoice-HHSC Accounting HEALTH & HUMAN SERVICES COMMISSION 4601 W Guadalupe St Austin TX 78751 United States		
			Fax: Email:	512/424-6901 HHSC_AP@hhsc.state.tx.us		
			Purchaser:	Ybarra,Diego		
Line-Sch	Inventory Item ID - Line Description	Class/Item Quan	tity UOM	PO Price Extended Amt Due Date		

FY23 funding SP/E Requisition 0000209211 - Pricing per Proposal 5825

Attached Terms and Conditions apply to this Purchase Order.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2023 are automatically canceled.

Vendor contact Gregory J. Westmoreland M-10397 (512) 288-7590 wplumbingcompany@gmail.com

Agency contact Lisa Rogge (512) 341-4523 Lisa.Rogge@hhs.texas.gov

PCS contact Diego Ybarra, CTCD (512) 406-2480 Diego.Ybarra01@hhs.texas.gov

HHSC contact(s) for scheduling/coordination of the install and removal: Pierre Drain / Pierre.Drain@hhs.texas.gov / 512-341-4648 or (512) 739-5099 Curtis Bush / Curtis.Bush@hhs.texas.gov / 512-341-517-2401

WIC program invoice approver: Melissa Anderson at Melissa.anderson@hhs.texas.gov (for HHS Accounts Payable use only)

1-1		962-46	1.00	LOT	1175.00000	\$1,175.00	10/20/2022
	Proposal to furnish, install and have certified a new 1/2 RPZ back-flow preventer for the existing ice-maker unit located at 4616 W Howard Lane, Austin, Texas, per attached quote.						

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Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
			Sche	edule Total	\$1,175.00	
			Item Total for Line 1		\$1,175.00	
			<b>Total PO Amount</b> \$1,175.00			
				-		

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	
DE GTOD	
SO.	10/14/2022