## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSIX	(-3-0000303001	
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			<b>Date</b> 10/18/22	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.  All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.		Ship To:  1081 - Edinburg:2520 S Veterans BI HEALTH & HUMAN SERVICES COMN 2520 S Veterans Blvd PO Box 960 Edinburg TX 78539 United States				

**Vendor:** 1391837105 8

4IMPRINT INC 25303 NETWORK PL CHICAGO IL 606731253

**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: 20 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

Ship Attention to: Judy Sanchez

AGENCY CONTACT: Name: Judy Sanchez Phone: 956-316-8263

Email: Judy.Sanchez@hhs.texas.gov

Purchaser Information: Name: Jocelynn Evans Phone #512-776-6233

Email Address: jocelynn.evans@hhs.texas.gov

VENDOR: VID: 1391837105 4IMPRINT INC Contact: Laura Wollerman 888-722-5203

lwollerman@4imprint.com

QUOTE 23748018

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 209144

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Email: HHSC\_AP@hhsc.state.tx.us

Purchaser: Evans, Jocelynn Quantity Line-Sch **Inventory Item ID - Line Description** Class/Item **UOM** PO Price Extended Amt **Due Date** .32000 1-1 641-50 500.00 EA \$160.00 10/31/2022 118275 Mood Straw Schedule Total \_\_\_\_ \$160.00 Item Total for Line 1 2-1 641-50 1.00 EA 50.00000 \$50.00 10/31/2022 SET UP CHARGE Schedule Total \$50.00 Item Total for Line 2 \$50.00 3-1 962-86 1.00 EA 9.39000 \$9.39 10/31/2022 **FREIGHT** Schedule Total \$9.39 Item Total for Line 3 \$9.39 Total PO Amount \$219.39

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

10/18/2022