

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via	Purchase Order	HHSTX-3-0000303056
Net 30	Prepaid & Allow	BEST WAY	Date	Revision
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.			10/18/22	1 - 10/21/2022
			Ship To:	2077 - Austin:909 W 45th St (DHB) HEALTH & HUMAN SERVICES COMMISSION 909 W 45th St (DHB) PO Box 149347 Bldg 2 Austin TX 78751 United States
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				Page 1

Vendor: 1953510017 6
INFORMATION AND REFERRAL FEDERATION OF
LOS ANGELES COUNTY
211 LA COUNTY
526 W LAS TUNAS DR
SAN GABRIEL CA 917761111
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: Powell,Kenneth J 512/406-2622

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY23 Funding

IT/D

Requisition 207025

Previous PO 275364

Quote: 22-012

PO Service Dates 10/18/22 Until 08/31/2023

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.

Purchase order issued in accordance with Texas Government Code §2157.068, PSC 111

Vendor Information:

Vendor: INFORMATION AND REFERRAL FEDERATION OF LOS ANGELES COUNTY

Vendor ID: 1953510017 6

Contact Name: Lizet Hernandez

Email: Lizet.hernandez@211la.org

Phone: (626) 350-1841

PRIMARY POINT OF CONTACT

Name: Esmeralda Miller

Email: esmeralda.miller@hhs.texas.gov

Phone: 512-786-7740

SECONDARY POINT OF CONTACT

Name: James Valdenegro

Email: James.Valdenegro@hhs.texas.gov

Phone: 512-423-3088

Purchaser

Contact: Kenneth J Powell Sr

Email: kenneth.powell@hhs.texas.gov

1-1	211-Taxonomy subscription	956-58	24.00	EA	180.00000	\$4,320.00	10/18/2022
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Schedule Total \$4,320.00

Item Total for Line 1 \$4,320.00

Total PO Amount \$4,320.00

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

Kenneth J. Powell Sr

10/21/2022