Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX	-3-0000303390	
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 10/24/22	Revision Pag		
			Ship To:	5059 - Kerrville:721 Thompson Dr HEALTH & HUMAN SERVICES COMMISSION 721 Thompson Dr Kerrville TX 78028 United States		
Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States		Bill To:	Invoice-DSHS Accounts Payab HEALTH & HUMAN SERVIO 6711 S New Braunfels Ste 100 San Antonio TX 78223		

Fax: 210/531-7883

Email: SAHAccounting@dshs.texas.gov

United States

Purchaser: Alvarado, Veronica

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

FY23 Purchase / Requisition #: 0000206111

Shipping Instructions: Ship according to the DUE DATES specified on the PO.

Freight: F.O.B Destination Freight Prepaid Allowed

Delivery: 15 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

Agency Contact:

Priscilla Jarecke @ 830-896-2211 Ext: 5218

priscilla.jarecke@hhs.texas.gov

Lead Contact:

Tracy Lisenby @ 830-896-2211 x EXT 6620

tracy.lisenby@hhs.texas.gov

Purchaser:

Veronica Alvarado @ (512) 406-2505 Veronia.Alvarado@hhs.texas.gov

Vendor Name:

Workquest

Customer Service @ 512-451-8145

smartbuy@workquest.com

Purchasing Method: EX/0 Purchase made under the Authority of Texas Government Code 2155.441 (WorkQuest/TIBH Set-Aside)

Term Contact: 615-S1

Term: Start Date: 11-16-2021 / End Date: 11-30-2026

Smartbuy PO:

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

1-1 615-62 5.00 EA 10.25000 \$51.25 11/14/2022

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guarantees go requirements. All shipment	responses become a part of this numbered p pods or services delivered meet or exceed n ts, shipping papers, invoices, and correspondes Order Number.	Ship To:	hip To: 5059 - Kerrville:721 Thompson Dr HEALTH & HUMAN SERVICES CON 721 Thompson Dr Kerrville TX 78028 United States				
Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States		Bill To:	ill To: Invoice-DSHS Accounts Payable HEALTH & HUMAN SERVICES 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States		COMMISSION	
			Fax: Email:	210/531-7883 SAHAccounting@dshs.texas.gov Alvarado,Veronica			
			Purchaser:				
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date	
	Lined,100 Sheets/Pad, 6 Pads/Pk; Supplier Part Number: MMM6605SSCYneon						
			Sch	edule Total	\$51.25		
			Item Total	for Line 1	\$51.25		
			Total I	PO Amount	\$51.25		

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

Murica Huela

10/24/2022