# **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Terms Net 30	Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHST	X-3-0000303412	
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.			<b>Date</b> 10/24/22	Revision Page		
			Ship To:  2039 - Austin:909 W 45th St (DH HEALTH & HUMAN SERVICE: 909 W 45th St (DHB) PO Box 12668 Austin TX 78751 United States		` /	

1391837105 8 Vendor:

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:** Alvarado, Veronica

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

FY23 Purchase / Requisition #: 0000210478

Procurement Type: SP/E Not to Exceed \$2678.20

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

Freight: F.O.B Destination Freight Prepaid Allowed

Delivery: 5 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

Quote: 23853946

Primary Contact:

Thelma Rey @ 915-471-8746 thelma.rey@hhs.texas.gov

See attachment containing multiple shipment locations.

Veronica Alvarado @ 512-406-2505 Veronica.Alvarado@hhs.texas.gov

Vendor Information:

4IMPRINT

Liz McGlenn @ 877-446-7746 Ext. 8434

Imcglenn@4imprint.com

Requirement / Limitations:

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding.

1-1 200-70 300.00 EA 4.98000 \$1,494.00 11/01/2022 Hanes Authentic T Shirt- Screen-Colors

> Schedule Total \$1,494.00 \$1,494.00 Item Total for Line 1

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			Ship To:	2039 - Austin:909 W 45th St (DHB) HEALTH & HUMAN SERVICES COMMISSION 909 W 45th St (DHB) PO Box 12668 Austin TX 78751 United States		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.						

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: Alvarado, Veronica **Inventory Item ID - Line Description** Class/Item Quantity Line-Sch **UOM** PO Price **Extended Amt** Due Date 2-1 965-57 1200.00 EA .19000 \$228.00 11/01/2022 Additional color run charge Schedule Total \$228.00 \$228.00 Item Total for Line 2 963-39 1.00 EA 40.00000 \$40.00 11/01/2022 3-1 Set Up charge (1st color) Schedule Total \$40.00 Item Total for Line 3 \$40.00 4-1 963-39 5.00 LOT 15.00000 \$75.00 11/01/2022 set up charge (additional location)1 Schedule Total \$75.00 Item Total for Line 4 \$75.00 1.07000 5-1 963-39 300.00 EA \$321.00 11/01/2022 Additional Location Run Charge 1st color Schedule Total \$321.00 \$321.00 Item Total for Line 5 963-39 1200.00 EA .19000 \$228.00 11/01/2022 6-1 Additional Location Run Charge 2nd Schedule Total \$228.00 Item Total for Line 6 \$228.00 7-1 963-39 4.00 EA 15.00000 \$60.00 11/01/2022 Set Up Charge

#### **Health and Human Services Commission**

#### **Purchase Order**

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Payment Terms	Freight Terms	Ship Via		111071	0.0000000110	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSIX	-3-0000303412	
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> 10/24/22	Revision Page 3		
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** 100	1025105.0			I i IIIIG i ii		

**Vendor:** 1391837105 8

4IMPRINT INC 25303 NETWORK PL CHICAGO IL 606731253

**United States** 

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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: Alvarado, Veronica Quantity Extended Amt Line-Sch **Inventory Item ID - Line Description** Class/Item **UOM** PO Price **Due Date** Schedule Total \$60.00 Item Total for Line 7 \$60.00 8-1 962-86 1.00 LOT 169.70000 \$169.70 11/01/2022 Freight \$169.70 Schedule Total Item Total for Line 8 \$169.70 963-39 10.00 LOT 6.25000 \$62.50 11/01/2022 9-1 Drop Ship Charge Schedule Total \$62.50 \$62.50 Item Total for Line 9 \$2,678.20 Total PO Amount

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

10/24/2022