Department of State Health Services

Purchase Order

Dispatch via Print

Extended Amt Due Date

Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	ння	STX-3-0000303824
If advertised specification	by informal bid, Invitation for Offer, or I s, terms, and conditions set forth in the ac	Request for Proposal; all dvertisement and vendor's	Date 10/28/22	Revision	Page 1
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: 4546 - Austin:1100 W 49th St (DB DEPARTMENT OF STATE HEAI 1100 W 49th St (DBGL) PO Box 149347 Austin TX 78756 United States		ATE HEALTH SERVICES
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICE 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov	,
			Purchaser:	Call,Julie Ann	512/406-2514

Quantity

UOM

PO Price

Class/Item

FREIGHT: F.O.B DESTINATION FREIGHT PREPAID ALLOWED

Inventory Item ID - Line Description

DELIVERY: 30 DAYS AFTER RECEIPT OF PO

AGENCY DELIVERY CONTACT:

DENE THOMPSON 512-776-2457

Line-Sch

DENE.THOMPSON@DSHS.TEXAS.GOV

REQUESTOR/INTERNAL DELIVERY INFO:

JAN OWEN 512-776-7342 JAN.OWEN@DSHS.TEXAS.GOV

HHSC BUYER: JULIE, CTCD, CTCM 512-406-2514 JULIE.CALL@HHS.TEXAS.GOV

VENDOR:

SOUTH CENTRAL SUPPLY_1900999880800 828 BETTERMAN DRIVE PFLUGERVILLE TEXAS 78660 SALES@SUPPLYTEXAS.COM (512) 367 - 0311

QUOTE # Q14228

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 FY23.

REQUISITION # 209429

1-1 203-87 10.00 M 47.25000 \$472.50 10/28/2022

Department of State Health Services

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Payment Trans								Dispa	tch via Print
Eaderstate-by informal Bell, Invitation for Office or Request for Proposal: all specifications, from, and conditions set forth in the advertisement and vendor's conforming responses become a part of this numbered purchase order. Contractor granting responses become a part of this numbered purchase order. Contractor granting responses become a part of this numbered purchase order. Contractor granting responses become a part of this numbered purchase order. Contractor granting responses become a part of this numbered purchase order. Contractor granting responses become a part of this numbered purchase order. Contractor granting responses become a part of this numbered purchase order. Contractor granting responses become a part of this numbered purchase order. Contractor granting responses become a part of this number developed and the property of the					Purc	hase Order		HHSTX-3-0	000303824
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Substitution Display Displayers, invoices, and correspondence must be identified with our Purchase Order Number. Vendor: 1900099880 SOUTH CENTRAL SUPPLY LLC SOUTH CENT					10/2	8/22			2
No. Policy Poli	guarantees g requirement	goods or services delivered meet or exceed n s.	umbered purchas	se order	Ship	To:	DEPARTMENT	OF STATE HEALT	
Number 1900999898 SOUTH CENTRAL SUPPLY LLC SOUTH CENTRAL SUPPLY LLC			ondence must b	e identified			PO Box 149347 Austin TX 78756	ŕ	
Email:	Vendor:	SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117				Го:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756		
Direct									
BLACK ON WHITE, CONSECUTIVE NUMBERS (AP230000) TO AP230000) 2 LABELS PER NUMBER, PREFIX PRINTS ABOVE NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 10000 LABELS PRICED PER THOUSAND, ROLLS OF 1000 Schedule Total \$472.50						haser:			
NUMBER, PREFIX PRINTS ABOVE NUMBER, PREFIX PRINTS ABOVE NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 1,0000 LABBLS PRICED PER THOUSAND, ROLLS OF 1000 2-1 XYLENE RESISTANT MYLAR NUMBER (AMCC235000) 170 AMCC235000) 1 LABEL PER NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 25000 LABBLS PRICED PER THOUSAND, ROLLS OF 1000 3-1 XYLENE RESISTANT MYLAR NUMBER, PREFIX PRINTS ABOVE NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 25000 LABBLS PRINTS ABOVE NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 25000 LABBLS PRICED PER THOUSAND, ROLLS OF 1000 Schedule Total S1,181.25 Item Total for Line 2 S1,181.25 Item Total for Line 3 59.45 REPRICED PER THOUSAND, ROLLS OF 1000 Schedule Total S94.5 REPRICED PER THOUSAND, ROLLS OF 1000 Schedule Total S94.5 REPRICED PER THOUSAND, ROLLS OF 1000 Schedule Total S94.5 Repriced PER THOUSAND, ROLLS OF 1000 Schedule Total S94.5 Repriced PER THOUSAND, ROLLS OF 1000 Schedule Total S94.5 Repriced PER THOUSAND, ROLLS OF 1000	Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM		PO Price	Extended Amt	Due Date
2-1		NUMBERS (AP2300001 TO AP2305000) 2 LABELS PER NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 10000 LABELS PRICED PER THOUSAND, ROLLS OF							
2-1						Sche	dule Total	\$472.50	
XYLENE RESISTANT MYLAR NUMBER LABELS, 5/8 X 7/8 IN, BLACK ON WHITE, CONSECUTIVE NUMBERS (AMCC2300001 TO AMCC235000) I LABEL PER NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 25000 LABELS PRICED PER THOUSAND, ROLLS OF 1000 Schedule Total \$1,181.25									
Schedule Total \$1,181.25	2-1	NUMBER LABELS, 5/8 X 7/8 IN, BLACK ON WHITE, CONSECUTIVE NUMBERS (AMCC2300001 TO AMCC2325000) 1 LABEL PER NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 25000 LABELS PRICED PER THOUSAND, ROLLS OF	203-87	25.00	M		47.25000	\$1,181.25	10/28/2022
Stem Total for Line 2 \$1,181.25		1000				C-l	d T	¢1 101 25	
3-1 XYLENE RESISTANT MYLAR NUMBER LABELS, 5/8 X 7/8 IN, BLACK ON WHITE, CONSECUTIVE NUMBERS (AMSO2300001 TO AMSO2300200) 1 LABEL PER NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 200 LABELS PRICED PER THOUSAND, ROLLS OF 1000 Schedule Total \$9.45 Item Total for Line 3 \$9.45									
XYLENE RESISTANT MYLAR NUMBER LABELS, 5/8 X 7/8 IN, BLACK ON WHITE, CONSECUTIVE NUMBERS (AMSO2300001 TO AMSO2300200) 1 LABEL PER NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 200 LABELS PRICED PER THOUSAND, ROLLS OF 1000 Schedule Total \$9.45 Item Total for Line 3 \$9.45						item Totai	or Line 2	\$1,101.23	
Item Total for Line 3 \$9.45	3-1	NUMBER LABELS, 5/8 X 7/8 IN, BLACK ON WHITE, CONSECUTIVE NUMBERS (AMSO2300001 TO AMSO2300200) 1 LABEL PER NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 200 LABELS PRICED PER THOUSAND, ROLLS OF	203-87	0.20	M		47.25000	\$9.45	10/28/2022
						Sche	dule Total	\$9.45	
4-1 203-87 25.00 M 47.25000 \$1,181.25 10/28/2022						Item Total i	for Line 3	\$9.45	
	4-1		203-87	25.00	M		47.25000	\$1,181.25	10/28/2022

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Payment To		Ship Vi				IIIIOTV A A	00000004
specification	Prepaid & Allow I by informal bid, Invitation for Offer, or Request, terms, and conditions set forth in the adverted	rtisement and ven	; all ndor's	Purchase Orde Date 10/28/22	r Revision	HHSTX-3-0	UUU3U3824 Page 3
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Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States			Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States		
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Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	Purchaser: UOM	Call,Julie Ann PO Price	5 Extended Amt	12/406-2514 Due Date
	XYLENE RESISTANT MYLAR NUMBER LABELS, 5/8 X 7/8 IN, BLACK ON CLEAR, CONSECUTIVE NUMBERS (AMCC2300001 TO AMCC2325000) 1 LABEL PER		<u></u>				
	NUMBER, PREFIX PRINTS ABOVE NUMBER, TOTAL 25000 LABELS PRICED PER THOUSAND, ROLLS OF 1000						
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	NUMBER, TOTAL 25000 LABELS PRICED PER THOUSAND, ROLLS OF				nedule Total		
5-1	NUMBER, TOTAL 25000 LABELS PRICED PER THOUSAND, ROLLS OF	962-86	1.00				10/28/2022
5-1	NUMBER, TOTAL 25000 LABELS PRICED PER THOUSAND, ROLLS OF 1000 PRICING IS BASED ON A 45 LOT	962-86	1.00	Item Tota	l for Line 4	\$1,181.25 \$0.00	10/28/2022
5-1	NUMBER, TOTAL 25000 LABELS PRICED PER THOUSAND, ROLLS OF 1000 PRICING IS BASED ON A 45 LOT	962-86	1.00	LOT Sci	0.00000	\$1,181.25 \$0.00 \$0.00	10/28/2022

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

Julie Call, CTPM, CTCM

11/02/2022