Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order		HHSTX-3-0000304105	
If advertised by infor	rmal bid, Invitation for Offer, or	Request for Proposal; all	Date	Revision	Page	
specifications, terms, and conditions set forth in the advertisement and vendor's			11/02/22		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:	6943 - Austin:6101 E Oltorf HEALTH & HUMAN SERVICES COMMISSION 6101 E Oltorf Austin TX 78741 United States		

Vendor: 1410948415 5

FASTENAL COMPANY

PO BOX 1286

WINONA MN 55987-0978

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: Reese, Travis

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

FY23 Purchase

-

Procurement Type: CP / X Requisition: 0000210117

-

Agency Contact: Name: Tracy Hart Phone: (512) 437-5212 Email: tracy.hart@ssa.gov

Purchaser Information: Name: Travis Reese Phone: (832) 212-9330

Email: travis.reese@hhs.texas.gov

Vendor: Fastenal

Vendor Contact: Zach Wise Vendor Phone: (507) 313-7206 Email: ordernotify@fastenal.com

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Contract#: TXMAS-18-51V07
TxSmartbuy PO#: 23028697

Quote#: NA

-

Include P.O. Number on packing Slips, Cartons, Packages,

Bundles, ETC.

Freight: F.O.B. Destination Freight Prepaid Allowed

Terms: Net 30

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

Health and Human Services Commission

Purchase Order

Freight Terms

Payment Terms

Dispatch via Print

Net 30	Prepaid & Allow	Ship Via BEST W		Purchase Order		HHSTX-3-0	000304105
specifications	by informal bid, Invitation for Offer, or Req , terms, and conditions set forth in the adver	rtisement and ven	ment and vendor's	Date 11/02/22	Revision		Page 2
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Vendor:	1410948415 5 FASTENAL COMPANY PO BOX 1286 WINONA MN 55987-0978 United States			Bill To:	Invoice-HHSC Ac HEALTH & HUM 4601 W Guadalup Austin TX 78751 United States	IAN SERVICES CO	OMMISSION
				Fax: Email:	512/424-6901 HHSC_AP@hhsc.	.state.tx.us	
				Purchaser:	Reese,Travis		_
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
	84 TAC §20.487, amended effective May	•	VALUE IS	PROVIDED BY THE	TXMAS CONTRA	CT	
1-1	Large Radians RWG558 Axis[TM] Cut Protection Level A7, Commodity Code 34548, Contract # TXMAS-18-51V07, Supplier Part #921671964, Manufacturer # RWG558L	345-48	3.00	EA	8.95000	\$26.85	11/02/2022
				Sche	edule Total	\$26.85	
Large Coated	Glove			Item Total	for Line 1	\$26.85	
				Total P	O Amount	\$26.85	

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	
- Carie Rosse, CTCD, CTCM	11/02/2022