## **Health and Human Services Commission**

#### **Purchase Order**

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via			IOTV 0 000000 4500
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HF	HSTX-3-0000304582
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> 11/08/22	Revision	<b>Page</b> 1
	es become a part of this numbered services delivered meet or excee		Ship To:	4551 - Austin:4301 N HEALTH & HUMAN 4301 N Lamar Blyd	Lamar Blvd SERVICES COMMISSION
All shipments, ship with our Purchase	ping papers, invoices, and corr Order Number.	espondence must be identified		Austin TX 78751 United States	
			_		

**Vendor:** 1900999880 8

SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117

**United States** 

Bill To: Invoice - DADS

HEALTH & HUMAN SERVICES COMMISSION

4001 Highway 36 South Brenham TX 77833 United States

Fax: 979/277-1865

Email: 712Accounting@hhs.texas.gov

Purchaser: Mills,George M

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

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: 30 Days After Receipt of PO

DELIVERY: Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday - Friday except designated State Holidays when the Warehouse is closed.

Please call Agency Delivery Contact to schedule delivery 24 hours prior to arrival.

Please follow the Texas Comptroller's Invoicing standards as seen below.

Include PO Number on invoices, bills, receipts, bill lading, packing slips, and back order.

(a) To receive payment, a contractor must submit an invoice to the State Agency receiving the goods or services.

The invoice should include, but is not limited to including:

- (1) the contractor's mailing and e-mail (if applicable) address.
- (2) the contractor's telephone number.
- (3) the name and telephone number of a person designated by the contractor to answer questions regarding the invoice.
- (4) the state agency's name, agency number, delivery address.
- (5) the state agency's purchase order number, if applicable.
- (6) the contract number or other reference number, if applicable.
- (7) a valid Texas identification number (TIN) issued by the Comptroller.
- (8) a description of the goods or services, in sufficient detail to identify the order which relates to the invoice.
- (9) unit numbers corresponding to the amount of the invoice.
- (10) if submitting an invoice after receiving an assignment of a contract, the TIN of the original contractor and the TIN of the successor vendor.
- (11) other relevant information supporting and explaining the payment requested.

Warehouse: Please deliver to bldg. 800

AGENCY CONTACT: Dangerfield Gabriele N/A Gabriele.Dangerfield@hhs.texas.gov 512-419-2663

Ship to Attn: Gabriele Dangerfield Building and Room number HEALTH HUMAN SERVICESCOMMISSION 4301 N Lamar Blvd Austin TX 78751 United States

HHSC BUYER:

George Mills, CTCD, Ph 512-406-2651, Fax 512-406-2695,

## **Health and Human Services Commission**

# **Purchase Order**

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Payment Terms	Freight Terms	Ship Via			
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-3-000	00304582
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> 11/08/22	Revision	Page
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.			Ship To:	4551 - Austin:4301 N Lamar Blvd HEALTH & HUMAN SERVICES COMMISSION 4301 N Lamar Blvd Austin TX 78751 United States	
; ;	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States		Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSIO 4001 Highway 36 South Brenham TX 77833 United States	
			Fax: Email:	979/277-1865 712Accounting@hhs.texas.gov	

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

email George.Mills@hhs.texas.gov

VENDOR:

South Central Supply Vendor Contact: Joe Martinez Vendor Phone: 512-367-0311

Vendor Email: sales@supplytexas.com

VENDORS SEND INVOICES VIA EMAIL TO \*\* 712Accounting@hhsc.state.tx.us

**QUOTE Q13454** 

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. FY2023 funding.

Invoice per 34 TAC §20.487, amended effective May 1, 2022

Requisition 0000210273

1-1	FY23-Goods, #DAR044A4BSLDD-6, Darby 4.4 cu. ft. Compact All-Fridge Refrigerator, Stainless Steel.	045-06	1.00	EA	325.99000	\$325.99	11/08/2022
					Schedule Total	\$325.99	•
Quote is att	ached				Item Total for Line 1	\$325.99	
2-1	FY23-Goods, #D32f-J04, Vizio 32" Class D-Series FHD LED Smart TV with two HDMI ports.	840-59	1.00	EA	170.99000	\$170.99	11/08/2022
					Schedule Total	\$170.99	
					Item Total for Line 2	\$170.99	

## **Health and Human Services Commission**

### **Purchase Order**

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Payment Te		Ship Via		LILICTY 2 04	000004500
Net 30	Prepaid & Allow	BEST WAY	Purchase Order		JUU3U4582
	by informal bid, Invitation for Offer, or Reconst, terms, and conditions set forth in the adve		<b>Date</b> 11/08/22	Revision	Page 3
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:	4551 - Austin:4301 N Lamar Blvd HEALTH & HUMAN SERVICES CC 4301 N Lamar Blvd Austin TX 78751 United States	OMMISSION
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States		Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSIO 4001 Highway 36 South Brenham TX 77833 United States	
			Fax: Email:	979/277-1865 712Accounting@hhs.texas.gov	
<b>T</b> • G J	The transfer of the transfer o	Cl. III.	Purchaser:	Mills,George M	D D /
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extended Amt	Due Date
			Total P	O Amount \$496.98	

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** 

11/08/2022