Health and Human Services Commission

Purchase Order

Dispatch via Print

Ship Via **Payment Terms** Freight Terms HHSTX-3-0000304748 Net 30 Prepaid & Allow BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Date Revision Page specifications, terms, and conditions set forth in the advertisement and vendor's 11/09/22 1 conforming responses become a part of this numbered purchase order. Contractor Ship To: 4549 - San Antonio:6711 S New Brau guarantees goods or services delivered meet or exceed numbered purchase order HEALTH & HUMAN SERVICES COMMISSION requirements. 6711 S New Braunfels All shipments, shipping papers, invoices, and correspondence must be identified Ste 100 with our Purchase Order Number. San Antonio TX 78223 United States 17419760511 Bill To: Invoice-DSHS Accounts Pavable Vendor: HEALTH & HUMAN SERVICES COMMISSION WORKQUEST 1011 E 53RD 1/2 ST 6711 S New Braunfels AUSTIN TX 787511703 Ste 100 San Antonio TX 78223 **United States** United States Fax: 210/531-7883 Email: SAHAccounting@dshs.texas.gov **Purchaser:** Alexander,Leslie L 512/406-2424 Quantity Line-Sch **Inventory Item ID - Line Description** Class/Item UOM **PO Price** Extended Amt **Due Date** FY23 Purchase TX Smart Buy Purchase Order #: 23046335 _____ PCC: EX/0 615-S1 Term: 11/16/2021 - 11/30/2026 Requisition #: 0000209774 INVOICING - See above for Bill to Information See above for SHIP TO ADDRESS ON PO Agency Delivery Contact: Rosalinda Rodriguez / 210-531-8405 Email: Rosalinda.Rodriguez@hhs.texas.gov HHSC terms and conditions attached Purchaser Information: HHSC Purchasing: Contact Name: Leslie Alexander Contact Phone: 512-406-2424 Fax: 512-406-2695 Email: Leslie.Alexander@hhs.texas.gov VENDOR INFORMATION: Contact Name: WorkQuest Customer Service Email: customerservice@workquest.com Phone: (512) 451-8145 Freight Terms are FOB Destination Prepaid and Allowed/Add Terms: Net 30 LEGAL SITE: Prison Made Good Act 2155.065 and is noncompetitive. **INTERAGENCY COOPERATION ACT - TGC Chapter 771**

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N 1 4	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States			Bill To:	Invoice-DSHS Accounts Payable HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States		OMMISSION
				Fax: Email:	210/531-7883 SAHAccounting@d	shs.texas.gov	
				Purchaser:	Alexander,Leslie L	. 5	12/406-2424
Line-Sch Inv	entory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
	73162106 - Binder, 1 1/2" Capacity, ing, Vinyl View; Color: Black	615-73	20.00	EA	4.17000	\$83.40	11/29/2022
				Sche	Schedule Total \$83.40		
				Item Total	Item Total for Line 1 \$83.40		
				Total P	O Amount	\$83.40	

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 Justie Alut S, CTP

<u>11/09/2022</u>