Health and Human Services Commission

Purchase Order

Dispatch via Print Payment Terms Freight Terms Ship Via HHSTX-3-0000305605 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 11/23/22 1 conforming responses become a part of this numbered purchase order. Contractor Ship To: 5950 - El Paso:6700 Delta Dr guarantees goods or services delivered meet or exceed numbered purchase order HEALTH & HUMAN SERVICES COMMISSION requirements. 6700 Delta Dr All shipments, shipping papers, invoices, and correspondence must be identified 6700 Delta Dr with our Purchase Order Number. El Paso TX 79905 United States 19009998808 Bill To: Invoice-DSHS Accounts Pavable Vendor: SOUTH CENTRAL SUPPLY LLC DEPARTMENT OF STATE HEALTH SERVICES 828 BETTERMAN DR 1200 E Brin PFLUGERVILLE TX 786605117 PO Box 70 **United States** Terrell TX 75160 United States Fax: 972/551-8052 Email: DSHS.TSHBusinessOffice@dshs.texas.gov **Purchaser:** Burns, Debra A Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity UOM **PO Price** Extended Amt Due Date CLASS ITEM 660-23 SCOR Division: 19 State Operated Facility ITEMS TO BE ORDERED ON AS NEEDED BASIS FOR THE FACILITY El Paso State Supported Living Center Maintenance - Client-Cigarette Lighters BLANKET PURCHASE ORDER TERM: November 23, 2022 through August 31, 2023 SHIPPING INSTRUCTIONS: DO NOT SHIP until notified by Agency Contact. FREIGHT: F.O.B. Destination Freight Prepaid Allowed-Add DELIVERY: PER FACILITY REQUEST 3-10 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 AGENCY CONTACT: ***PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN MYRA RUBIO 915-782-6388 MYRA.RUBIO@hhs.texas.gov Contract Specialist: Estela Dorado 915-782-6309 estela.dorado@hhs.texas.gov ADOA ROBERT SOTO ROBERT.SOTO@hhs.texas.gov

Warehouse: Please deliver to building: 504,Attention: James W. Lannon Ship to: 5950 El Paso State Supported Living Center 6700 Delta El Paso, Tx 79905

Bill to: 3072 El Paso State Supported Living Center c/o Terrell State Hospital Attn: Accounts Payable P.O. Box 70 Terrell, TX 75160

Vendors send invoices via email to: dshs.tshbusinessoffice@dshs.texas.gov

VENDOR: VID 1900999880 Vendor: South Central Supply LLC Contact HOPE CRAFT Vendor PH: 512.367.0311 Vendor Email: Sales@supplytexas.com

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f advertised by	v informal bid, Invitation for Offer, or Req terms, and conditions set forth in the adve		l; all	Purchase Order Date 11/23/22	Revision	111017-3-00	Page	
onforming res uarantees goo equirements. Il shipments,	shipping papers, invoices, and correspondences.	Ship To:	5950 - El Paso:6700 Delta Dr HEALTH & HUMAN SERVICES COMMISSION 6700 Delta Dr 6700 Delta Dr					
				El Paso TX 79905 United States				
√endor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States		Bill To:	Invoice-DSHS Accounts Payable DEPARTMENT OF STATE HEALTH SE 1200 E Brin PO Box 70 Terrell TX 75160 United States		I SERVICES		
				Fax: Email:	972/551-8052 DSHS.TSHBusinessOffice@dshs.texas.gov			
				Purchaser:	Burns,Debra A			
ine-Sch I	nventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
Quantities ma The quantities	NTS/LIMITATIONS: y be increased or decreased upon new s shown are estimates only and do not ered cancelled.				ies not ordered an	d received by Aug	ust 31, 2023,	
Goods and/or	services are to be delivered and invoi	ced after Septe	ember 1, 202	2.				
his PO is cor	ntingent upon the continued availability	y of lawful appro	opriations by	the Texas Legislatur	e. FY23 funding.			
nvoice per 34	TAC §20.487, amended effective Ma	y 1, 2022						
Requisition 00	000209451							
	will not order products on this PO that ets on this PO	t are available f	rom Workqu	est, Texas Correction	al Industries or DII	R. Agency will not	order capital or	
	is for goods to be ordered as needed I mit to ordering specific quantities of go					Supported Living	Center. HHSC	
naximum that	are based on estimates of prior purch the agency must order. HHSC shall gust 31 (the end of the fiscal year) will	be obligated to	pay for only	those goods actually				
ollowing the	Products to the Contract: contract award, additional products of ly on the contract, may be added.	the same gene	eral category	that could have been	encompassed in t	the award of this c	ontract, and tha	
-1	FY23 BLANKET CH5 (EPSSLC)	660-23	1.00	LOT 4	1999.00000	\$4,999.00	08/31/2023	

Cigarette Lighter Electrical Wall Mount 12V ITEM OZILITE ACLBPS TERM 11/23/2022 - 08/31/2023

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Payment Terms	Freight Terms	Ship Via				ten via Print
Net 30	Prepaid & Allow	BEST WAY	Purchase Order		HHSTX-3-00	000305605
If advertised by infor specifications, terms,	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			Revision		Page 3
guarantees goods or s requirements.	s become a part of this numbered p ervices delivered meet or exceed n ing papers, invoices, and corresp Order Number.	umbered purchase order	Ship To:	5950 - El Paso:6700 Delta Dr HEALTH & HUMAN SERVICES COMMISSION 6700 Delta Dr 6700 Delta Dr El Paso TX 79905 United States		
SOU 828 PFL	0999880 8 JTH CENTRAL SUPPLY LLC BETTERMAN DR UGERVILLE TX 786605117 ted States		Bill To:	Invoice-DSHS Acc DEPARTMENT C 1200 E Brin PO Box 70 Terrell TX 75160 United States	counts Payable OF STATE HEALTH	I SERVICES
			Fax: Email:	972/551-8052 DSHS.TSHBusinessOffice@dshs.texas.gov		
			Purchaser:	Burns,Debra A		
Line-Sch Invent	ory Item ID - Line Description	Class/Item Quantity	V UOM	PO Price	Extended Amt	Due Date
			Sche	edule Total	\$4,999.00	
Mounting Style: Wal Lighting Method: Th seconds for the element Dimensions: 10.63" I Power: 4.2AH Batter Waterproof weathpro-	H x 4.92" W x 3.74" D y. oof rette lights before charging. tandard at 21'	ortable.	g capabilities			
			Item Total	for Line 1	\$4,999.00	
			Total P	O Amount	\$4,999.00	

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 OdraFuere, CTPM <u>11/23/2022</u>

Dispatch via Print