Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Te Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HH	STX-3-0000305628
specification	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 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:	2794 - San Antonio:11307 Roszell HEALTH & HUMAN SERVICES COMMISSION 11307 Roszell PO Box 23990 San Antonio TX 78217 United States	
Vendor:	or: 1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States		Bill To:	Invoice-HHSC Region 8, Inspect HEALTH & HUMAN SERVICES COMMISSIC 11307 Roszell PO Box 23990 San Antonio TX 78217 United States	

Fax: 210/619-8272

Email: Reg08_Admin_Services@hhsc.state.tx.us

Purchaser: Maldonado, Daniel Ray

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: 14 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:
John Trudell
210-326-1695

John.Trudell@hhs.texas.gov

Ship to Attn: John Trudell

HHSC BUYER:

Daniel Maldonado, CTCD

512-406-2649

Daniel.Maldonado01@hhs.texas.gov

VENDOR: Workquest

orders@workquest.com

PURCHASING METHOD: EX/0

Purchase made under the Authority of Texas Government Code 2155.441 (WorkQuest/TIBH Set-Aside)

Term Contact: 620-S1 Term: Today until 8/31/23 Smartbuy PO: 23055756

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 # 0000212445

1-1 620-90 48.00 DOZ 8.30000 \$398.40 12/12/2022

Health and Human Services Commission

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Payment Terms

Freight Terms

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ods or services delivered meet or exceed nu	Ship To:	Ship To: 2794 - San Antonio:11307 Roszell HEALTH & HUMAN SERVICES COMMIS 11307 Roszell PO Box 23990 San Antonio TX 78217 United States			
1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States		Bill To:	Invoice-HHSC Region 8, Inspect HEALTH & HUMAN SERVICES COMMISSION 11307 Roszell PO Box 23990 San Antonio TX 78217 United States		
		Fax: Email:	210/619-8272 Reg08_Admin_	Services@hhsc.state.tx.us	
		Purchaser:	Maldonado,Da	aniel Ray	
Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt Due	Date
Markers, Permanent, Jumbo, Round Bullit Tip COLOR: Red-62090241878 Supplier Part Number: 62090241852					
		Sche	Schedule Total		
		Item Total	Item Total for Line 1 \$398.40		
		Total P	O Amount	\$398.40	
	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States Inventory Item ID - Line Description Markers, Permanent, Jumbo, Round Bullit Tip COLOR: Red-62090241878	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States Inventory Item ID - Line Description Class/Item Quantity Markers, Permanent, Jumbo, Round Bullit Tip COLOR: Red-62090241878	hase Order Number. 1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States Fax: Email: Purchaser: Inventory Item ID - Line Description Class/Item Quantity UOM Markers, Permanent, Jumbo, Round Bullit Tip COLOR: Red-62090241878 Supplier Part Number: 62090241852 Sche Item Total	11307 Roszell PO Box 23990 San Antonio TY United States 1741976051 I Invoice-HHSC HEALTH & HI 11307 Roszell PO Box 23990 San Antonio TY United States 1741976051 I Invoice-HHSC HEALTH & HI 11307 Roszell PO Box 23990 San Antonio TY United States 1741976051 I Invoice-HHSC HEALTH & HI 11307 Roszell PO Box 23990 United States 1741976051 I Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 San Antonio TY United States 1741976051 I Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1881 To: Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1982 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1983 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1984 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1984 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1985 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1985 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1986 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1986 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1986 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1986 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1986 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1986 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1986 Invoice-HHSC HEALTH & HI 1307 Roszell PO Box 23990 United States 1986 Invoice-HHSC HI 1307 Roszell PO Box 23990 United States 1986 Invoice-HHSC HI 1307 Roszell PO Box 23990 United States 1986 Invoice-HHSC HI 1307 Roszell PO Box 23990 United States 1987 Invoice-HHSC HI 1307 Roszell PO Box 23990 United States 1987 Invoice-HHSC HI 1307 Roszell PO Box 23990 United States 1987 Invoice-HHSC HI 1307 Roszell PO Box 23990 United States 1987 Invoice-HHSC HI 1307 Roszell PO Box 23990 United States 1987 Invoice-HHSC HI 1307 Roszell PO Box 23990 United States 1987 Invoice-HHSC HI 1307 Roszell PO Box 23990 Unite	11307 Roszell PO Box 23990 San Antonio TX 78217 United States 1741976051 1 WORKQUEST 1011 E 3RD 1/2 ST AUSTIN TX 787511703 United States Fax: 210/619-8272 Email: Reg08_Admin_Services@hhsc.state.tx.us Purchaser: Maldonado_Daniel Ray Inventory Item ID - Line Description Class/Item Quantity UOM PO Price Extended Amt Due Markers, Permanent, Jumbo, Round 3ullit Tip COLOR: Red-62090241878 Supplier Part Number: 62090241852 Schedule Total \$398.40 Item Total for Line 1 \$398.40

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

Daniel Digitally signed by Daniel Maldonado Date: 2022.11.28
08:26:20.06:700'

Digitally signed by Daniel Maldonado Date: 2022.11.28
08:26:20.06:700'