Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Te	9	Ship Via		LUICTY 0 0000005070	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-3-0000305872	
If advertised	If advertised by informal bid, Invitation for Offer, or Request for Proposal; all			Revision Page	
specification	s, terms, and conditions set forth in the ad-	vertisement and vendor's	01/18/23	1	
guarantees go requirements All shipmen	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.			0293 - Beaumont:1090 S 4th St HEALTH & HUMAN SERVICES COMMISSION 1090 S 4th St Beaumont TX 77701 United States	
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States	TRAL SUPPLY LLC MAN DR LLE TX 786605117		Invoice-HHSC Reg 05; Administ HEALTH & HUMAN SERVICES COMMISSION 350 Pine St Flr 9 Beaumont TX 77701 United States	
			Fax: Email:	409/951-3209 Reg05_Admin_Services@hhsc.state.tx.us	

Purchaser:

UOM

Evans, Jocelynn

Extended Amt

Due Date

PO Price

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

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

Inventory Item ID - Line Description

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

Class/Item

Ship Attention to: Katie Franklin

Line-Sch

Please contact when order is shipped and expected delivery date.

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:

Quantity

- (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, and 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.

AGENCY CONTACT: Name: Katie Franklin Phone: 409-730-4012

Email: KATIE.FRANKLIN@HHS.TEXAS.GOV

Purchaser Information: Name: Jocelynn Evans Phone #512-776-6233

Email Address: jocelynn.evans@hhs.texas.gov

VENDOR: South Central Supply sales@supplytexas.com 512-367-0311

QUOTE # Q15488

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHST	X-3-0000305872
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			Date 01/18/23	Revision	Page 2
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:	0293 - Beaumont:1090 S 4th St HEALTH & HUMAN SERVICES COMMISSION 1090 S 4th St Beaumont TX 77701 United States	
Vendor: 1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States		Bill To:	Invoice-HHSC Reg 05; Administ HEALTH & HUMAN SERVICES COMMISSI 350 Pine St Flr 9 Beaumont TX 77701 United States		
			Fax: Email:	409/951-3209 Reg05 Admin Services@hh	isc.state.tx.us

Purchaser: Evans, Jocelynn

Line Sch. Inventory Item ID - Line Description Class/Item Quentity LIOM PO Price Evans, Jocelynn

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

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 # 0000213056

1-1	30 Mil White Composite Plastic ID Cards pack of 100 Reference# 46722WT 2 1/8" x 3 3/8"	080-10	5.00	PKG	62.50000	\$312.50	02/02/2023
					Schedule Total	\$312.50	
					Item Total for Line 1	\$312.50	
2-1	Anti-Print Transfer Vertical Badge Holder, 50pk Reference: 45281	080-40	10.00	EA	53.75000	\$537.50	02/02/2023
					Schedule Total	\$537.50	
					Item Total for Line 2	\$537.50	
3-1	Shipping	615-60	1.00	EA	37.87000	\$37.87	02/02/2023
					Schedule Total	\$37.87	
					Item Total for Line 3	\$37.87	
					Total PO Amount	\$887.87	

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Te Net 30	Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-0000305872
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			Date 01/18/23	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:	0293 - Beaumont:1090 S 4th St HEALTH & HUMAN SERVICES COMMISSION 1090 S 4th St Beaumont TX 77701 United States
Vendor: 1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States		Bill To:	Invoice-HHSC Reg 05; Administ HEALTH & HUMAN SERVICES COMMISSION 350 Pine St Flr 9 Beaumont TX 77701 United States	
			Fax: Email:	409/951-3209 Reg05_Admin_Services@hhsc.state.tx.us
			Purchaser:	Evans, Jocelynn

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.

Quantity

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

UOM

Performance under this purchase order is acceptance of the attached affirmations and terms and conditions.

Class/Item

Line-Sch

Inventory Item ID - Line Description

Jadgum Gunn, CTCD

PO Price

01/26/2023

Extended Amt

Due Date