Health and Human Services Commission

Purchase Order

Payment Te Net 30	Prepaid & Allow	Ship V BEST	WAY	Purchase Order		HHSTX-3-0000305938
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 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.			Date 12/01/22 Ship To:	RevisionPage3137 - Tyler:3303 Mineola HwyHEALTH & HUMAN SERVICES COMMISSION3303 Mineola HwyPO Box 5200Tyler TX 75702United States		
Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States			Bill To:	Invoice-HHSC; R HEALTH & HUN 302 E Rieck Rd Tyler TX 75703 United States	egion 04 Headqu MAN SERVICES COMMISSION
				Fax: Email:	903 534 8487 paula.thurman@h	hsc.state.tx.us
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	Purchaser: UOM	Maldonado,Dani	iel Ray 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: Vernon Thomas 903-509-5109 Vernon.Thomas@hhs.texas.gov

Ship to Attn: Vernon Thomas

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: 23056450

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 # 0000213519

Dispatch via Print

Health and Human Services Commission

Purchase Order

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International bit Prepaid & Allow BEST WAY Purchase Order HHSTX-3-0000305938 Fadvertised by informal bid, Invitation for Offer, or Request for Proposal, all perclifications, terms, and conditions set forth in the advertisement and vendor's onforming responses become a part of this numbered purchase order. Contractor unarantes, goods or services delivered meet or exceed numbered purchase order. Contractor unarantes, goods or services delivered meet or exceed numbered purchase order. Date Revision Page 131 -Typer.3303 Mineola Hwy PO Box 5200 Typer.3303 Mineola Hwy PO Box 5200 Typer.3303 Mineola Hwy 131 Typer.719tr.7302 United States Bill To: Invoice-HHSC; Region 04 Headqu HEALTH & HUMAN SERVICES COMMISSION 302 E Ricek Rd 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States Bill To: Invoice-HHSC; Region 04 Headqu Heachtrike HUMAN SERVICES COMMISSION 302 E Ricek Rd 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States Marker, Permanent, Jumbo, Round Bullit Tip COLOR: Blue-62090241860 Supplier Part Number: 62090241852 Schedule Total S199.20						Dispa	tch via Print
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uarantees goods or services delivered meet or exceed numbered purchase order sequirements. Il shipments, shipping papers, invoices, and correspondence must be identified ith our Purchase Order Number. Tendor: 17419760511 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States Bill To: Invoice-HHSC; Region 04 Headqu HEALTH & HUMAN SERVICES COMMISSION 302 E Ricek Rd Tyler TX 75703 United States Fax: 903 534 8487 Email: paula.thurman@hhsc.state.tx.us Purchaser: Maldonado,Daniel Ray ine-Sch Inventory Item ID - Line Description Class/Item Quantity Marker, Permanent, Jumbo, Round Bullit Tip COLOR: Blue-62090241850 Supplier Part Number: 62090241850 Schedule Total <u>\$199.20</u> Item Total for Line 1 <u>\$199.20</u>	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		
WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States HEALTH & HUMAN SERVICE'S COMMISSION 302 E Ricek Rd Tyler TX 75703 United States Fax: 903 534 8487 Email: paula.thurman@hhse.state.tx.us Purchaser: Maldonado,Daniel Ray <u>ine-Sch</u> Inventory Item ID - Line Description Class/Item Quantity UOM PO Price Extended Amt Due Date Marker, Permanent, Jumbo, Round Bullit Tip COLOR: Blue-62090241860 Supplier Part Number: 62090241852 Schedule Total \$199.20 Item Total for Line 1 \$199.20	guarantees goods or requirements. All shipments, ship	pring papers, invoices, and corresp		HEALTH & HUMAN SERVICES COMMISSION 3303 Mineola Hwy PO Box 5200 Tyler TX 75702 United States Invoice-HHSC; Region 04 Headqu HEALTH & HUMAN SERVICES COMMISSION 302 E Rieck Rd Tyler TX 75703			
Email: paula.thurman@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 Marker, Permanent, Jumbo, Round Bullit Tip COLOR: Blue-62090241860 Supplier Part Number: 62090241852 Schedule Total \$199.20 Item Total for Line 1	W 10 AU	WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703					Bill To:
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Marker, Permanent, Jumbo, Round Bullit Tip COLOR: Blue-62090241860 Supplier Part Number: 62090241852 Schedule Total				Purchaser:			
Tip COLOR: Blue-62090241860 Supplier Part Number: 62090241852 Schedule Total \$199.20 Item Total for Line 1 \$199.20	Line-Sch Inver	ntory Item ID - Line Description	Class/Item Quantit	y UOM	PO Price	Extended Amt	Due Date
Item Total for Line 1 \$199.20	Tip COL	OR: Blue-62090241860					
				Sche	Schedule Total \$199.20		
Total PO Amount \$199.20				Item Total	for Line 1	\$199.20	
				Total P	O Amount	\$199.20	

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 Maldonado /	Digitally signed by Daniel Maldonado Date: 2022.12.02 10:31:41 -06'00'	<u>12/02/2022</u>