Department of State Health Services

Purchase Order

Dispatch via Print

Payment Te	rms Freight Terms	Ship Via			0.000000101
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-	3-0000306191
If advertised	by informal bid, Invitation for Offer, or R	equest for Proposal; all	Date	Revision	Page
specification	s, terms, and conditions set forth in the ad-	vertisement and vendor's	12/06/22		1
guarantees governments 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.			1899 - Lubbock:6302 Iola Ave HEALTH & HUMAN SERVICES COMMISSION 6302 Iola Ave Lubbock TX 79424	
with our Pu	rcnase Order Number.			United States	
Vendor:	1582214685 6 SOUTHERN COMPUTER WAREH PO BOX 745102 ATLANTA GA 303745102 United States	DUSE INC	Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HE 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	EALTH SERVICES
			Fax:	512/458-7442	

Email:

invoices@dshs.texas.gov

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

FY23 Funding

SHIP TO ATTN: LORI DYE

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

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

DELIVERY: 7 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:

Lori Dye

Lori.Dye@dshs.texas.gov

Invoice/Payment Contact Jennifer Davis HSR01.Budget@dshs.texas.gov

HHSC BUYER: Lauren Josey, CTCD 512-406-2599 Lauren.Josey@hhs.texas.gov

VENDOR:

Southern Computer Warehouse Trent Watson 877-GOTOSCW ext. 294 trent.watson@m.scw.com

DIR CONTRACT # DIR-CPO-5090 QUOTE# 1755460

PURCHASING METHOD: IT/I (DIR Contract)

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

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			Fax: Email:	512/458-7442 invoices@dshs.te	xas.gov	
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	Purchaser: UOM	Josey,Lauren PO Price	Extended Amt	Due Date
Requisition	0000212624	, ,				
-1	Logitech USB Headset Stereo H570e 981-000574	204-68 4.00	EA	39.93000	\$159.72	12/15/2022
I-1		204-68 4.00		39.93000		12/15/2022
1-1		204-68 4.00	Sche		\$159.72	12/15/2022
1-1		204-68 4.00 204-68 4.00	Sche	edule Total	\$159.72 \$159.72	12/15/2022 12/15/2022
	981-000574 Logitech USB Headset Stereo H570e		Sche Item Total EA	edule Total	\$159.72 \$159.72 \$159.72	
	981-000574 Logitech USB Headset Stereo H570e		Sche Item Total EA Sche	for Line 1 39.93000	\$159.72 \$159.72 \$159.72 \$159.72	

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

How Jony, CTCD

12/06/2022