### **Department of State Health Services**

#### **Purchase Order**

**Dispatch via Print** 

Payment Terr Net 30	ms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-	3-0000306387
specifications,	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	<b>Page</b> 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:	DHT) EALTH SERVICES		
Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States		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: Email:	512/458-7442 invoices@dshs.texas.gov	

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: STACEY THOMAS 512-776-7770 STACEY.THOMAS@DSHS.TEXAS.GOV AUSTIN, TX

HHSC BUYER: Travis Martinez,CTCD Ph 512-438-5685 Travis.Martinez@hhs.Texas.Gov

VENDOR:

Contractor: WorkQuest, Inc. Email: smartbuy@workquest.com

Phone: (512) 451-8145

PURCHASING METHOD: EX/0

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

Term Contact: 605-s1 615-s1 620-s1

Smartbuy PO: 23059398

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 210896

# **Department of State Health Services**

### **Purchase Order**

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Payment Terms	Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHST	X-3-0000306387	
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.			<b>Date</b> 12/08/22	Revision Pa		
			Ship To:	1908 - Austin:1100 W 49th St (DHT) DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DHT) PO Box 149347 Austin TX 78756 United States		

Vendor: 1741976051 1

WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States Bill To: Invoice-DSHS Fiscal Claims

DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

**Fax:** 512/458-7442

Email: invoices@dshs.texas.gov

Martinez, Travis Purchaser: Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity **UOM** PO Price Extended Amt Due Date 605-69 4.83000 12/26/2022 1-1 6.00 EA \$28.98 8" Scissors Schedule Total \$28.98 Item Total for Line 1 \$28.98 605-85 5.00 EA 7.64000 \$38.20 12/26/2022 2-1 Desktop Stapler - Gray Schedule Total \$38.20 \$38.20 Item Total for Line 2 3-1 620-80 2.00 DZ 14.35000 \$28.70 12/26/2022 Uniball Gell Pens - Blue Schedule Total \_\_\_\_ \$28.70 Item Total for Line 3 \$28.70 12.00 EA 4.58000 4-1 615-62 \$54.96 12/26/2022 Post-Its 1 1/2 x 2 Yellow - 12 count \$54.96 Schedule Total Item Total for Line 4 \$54.96 11.92000 5-1 615-62 3.00 EA \$35.76 12/26/2022 Post-Its 3 x 5 Solid Yellow - 12 count Schedule Total \$35.76 Item Total for Line 5 \$35.76 9.97000 6-1 615-62 4.00 EA \$39.88 12/26/2022 Post-Its 4 x 6 Ruled Yellow - 12 count Schedule Total \$39.88 \$39.88 Item Total for Line 6

# **Department of State Health Services**

#### **Purchase Order**

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Payment To Net 30	erms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order		HHSTX-3-00	00306387
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.			<b>Date</b> 12/08/22	Revision	Page 3	
			Ship To:	1908 - Austin:1100 W 49th St (DHT) DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DHT) PO Box 149347 Austin TX 78756 United States		
Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVIOR 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States		I SERVICES
			Fax: Email:	512/458-7442 invoices@dshs.t	texas.gov	
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	Purchaser: UOM	Martinez,Travis	S Extended Amt	Due Date

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
This Muster, CTCD

Total PO Amount

12/12/2022

\$226.48