

# Department of State Health Services

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000306661</b>
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.			<b>Date</b> 12/13/22
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b>  <b>Page</b> 1
			<b>Ship To:</b> 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop 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

**Purchaser:** Rodriguez,Linda 512/406-2533

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY23 Purchase / Requisition # 213350

Freight Terms: FOB Destination. Freight included.

Shipping Instructions: Ship according to the DUE DATES specified on the PO.

SMARTBUY PO # 23059701

Agency Delivery Contact:  
Rae Williams @ 737-825-5133  
Rae.Williams@hhs.texas.gov

Purchaser Information:  
Linda Rodriguez @ 512-406-2533  
Linda.Rodriguez3@hhs.texas.gov

Vendor Information:  
WorkQuest  
Customer Service @ 512-451-8145  
customerservice@workquest.com

Term Contract # 620-S1

Procurement Method: EX/0  
Purchase made under the Authority of Texas Government Code 2155.441 (WorkQuest/TIBH Set-Aside)

Requirements/Limitations:  
This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature.

INCLUDE P.O. NUMBER ON INVOICES, PACKING SLIPS, CARTONS, PACKAGES, BUNDLES, ETC.

1-1	Commodity Code: 62080230105 - INK: Blue-62080230204 - Pen, Gel Ink, 0.7mm, Retractable, Rubber Grip, Zebra Sarasa, 4 Pens/Pack	620-80	13.00	EA	6.08000	\$79.04	12/27/2022
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**Schedule Total** \_\_\_\_\_ \$79.04  
**Item Total for Line 1** \_\_\_\_\_ \$79.04

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**Purchaser:** Rodriguez,Linda 512/406-2533

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
2-1	Commodity Code: 62080230105 - INK: Black-62080230105 - Pen, Gel Ink, 0.7mm, Retractable, Rubber Grip, Zebra Sarasa, 4 Pens/Pack	620-80	13.00	EA	6.08000	\$79.04	12/27/2022

**Schedule Total**                     \$79.04

**Item Total for Line 2**                     \$79.04

**Total PO Amount** \$158.08

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**

*Linda Rodriguez, CTED, CCM*

**12/14/2022**