Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Te	8	Ship Via		
specification	Prepaid & Allow by informal bid, Invitation for Offer, or Res, s, terms, and conditions set forth in the advo	ertisement and vendor's		HHSTX-3-0000306812 Revision Page 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.			r Ship 10:	6656 - Lubbock:3401 N University A HEALTH & HUMAN SERVICES COMMISSION 3401 N University Ave 3401 N University Ave Lubbock TX 79415 United States
Vendor:	1200141587 1 BLACK PLUMBING CO INC PO BOX 6347 ABILENE TX 796086347 United States		Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 2501 Maple St PO Box 451 Abilene TX 79602 United States
			Fax: Email:	325/795-3807 710Accounting@hhsc.state.tx.us
			Purchaser:	Lyncook,Shawn Patrick 512/406-2685
Line-Sch	Inventory Item ID - Line Description	Class/Item Qu	antity UOM	PO Price Extended Amt Due Date

FY23 Funding OM/Q -Phone bid - Texas Government Code 2156.063 Requisition 214404 PO Service Dates: 12/16/2022 to 08/31/2023

Attached Terms and Conditions apply to this Purchase Order.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2023 are automatically canceled.

PCS contact Shawn 'Patrick' LynCook 512-406-2685 shawn.lyncook@hhs.texas.gov LOCATION STIPULATION Preferred Vendor for Campus DA716 LBSSLC.

SCOR Division: 19 HHSC - State Operated Facilities

Vendor Name:	BLACK PLUMBING					
Vendor Address:	P.O. Box 6347, Abilene, TX 79608					
	4640 S. Treadaway Blvd. Abilene, TX 79602					
Vendor Contact:	Misti Myrick					
Vendor Contact Phone:	325-675-8391					
Vendor Contact Email: office@blackplumbing.com						
Vendor TIN#: 1200141587						
Contract Manager:	Betty Moore					
Contract manager phone	e: 806-741-3614					
Contract manager email	: betty.moore@hhs.texas.gov					
SME Agency Contact: Mia Owens						
SME Agency Contact phone: 806-741-3556						
SME Agency Contact email: mia.owens@hhs.texas.gov						
Lead Contact: Betty	Moore					
Lead Email: betty	r.moore@hhs.texas.gov					
Lead Phone: 806	-741-3614					

PCS Email PO to:

Health and Human Services Commission

Purchase Order

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Net 30	rms Freight Terms Prepaid & Allow	Ship V BEST V		Purchase	e Order	HHSTX-3-0	000306812	
If advertised specifications	by informal bid, Invitation for Offer, or Req s, terms, and conditions set forth in the adve	uest for Proposa	l; all ndor's	Date 12/16/22	Revision		Pag	
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Vendor:	1200141587 1 BLACK PLUMBING CO INC PO BOX 6347 ABILENE TX 796086347 United States			Bill To:	2501 Maple St PO Box 451	HEALTH & HUMAN SERVICES COMMISSION 2501 Maple St PO Box 451 Abilene TX 79602		
				Fax: Emai	325/795-3807 I: 710Accounting@	hhsc.state.tx.us		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	Purchaser UOM	Lyncook,Shawn PO Price	Patrick 51 Extended Amt	12/406-2685 Due Date	
Bill To: 4507 Abilene Star Attn: Accou PO Box 451 Abilene, Tx Accounts Pa (Medical) 32 Email Invoic SHIP TO: 6	te Supported Living Center unts Payable 79604 ayable Contact 325-795-3933 25-795-3237 ces to: 710Accounting@hhsc.state.tx.us 6656 ate Supported Living Center iversity							
		910-60	1.00	LOT	20000.00000	\$20,000.00		
1-1	FY23 Services - Fix sewer lines, clogged lines, pluming						12/16/2022	
1-1				Ite	Schedule Total	\$20,000.00 \$20,000.00	12/16/2022	

Health and Human Services Commission

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Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHST	(-3-0000306812	
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B P A	200141587 1 BLACK PLUMBING CO INC O BOX 6347 BILENE TX 796086347 J nited States		Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMM 2501 Maple St PO Box 451 Abilene TX 79602 United States	ICES COMMISSION	
			Fax: Email:	325/795-3807 710Accounting@hhsc.state.tx	Lus	
			Purchaser:	Lyncook,Shawn Patrick	512/406-2685	
Line-Sch Invo	entory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extend	ed 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		
Ahl	CTCD, CTCM	<u>12/16/2022</u>