Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Freight Terms Ship Via HHSTX-3-0000306961 Net 30 Prepaid & Allow BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Page Date Revision specifications, terms, and conditions set forth in the advertisement and vendor's 12/19/22 1 - 12/21/2022 1 conforming responses become a part of this numbered purchase order. Contractor 4551 - Austin:4301 N Lamar Blvd Ship To: guarantees goods or services delivered meet or exceed numbered purchase order HEALTH & HUMAN SERVICES COMMISSION requirements. 4301 N Lamar Blvd All shipments, shipping papers, invoices, and correspondence must be identified Austin TX 78751 with our Purchase Order Number. United States Vendor: 13824712197 Bill To: Invoice - DADS Accounts Payabl RODZINA INDUSTRIES INC HEALTH & HUMAN SERVICES COMMISSION 3518 FENTON RD 424 Mesquite Dr FLINT MI 485071567 P O Box 1132 United States Mexia TX 76667 United States Fax: 254/562-1171 **Purchaser:** Evans, Jocelynn Inventory Item ID - Line Description UOM PO Price Line-Sch Class/Item Quantity **Extended Amt Due Date** FY23 General Goods Spot Purchase SP/E Requisition #: 0000213421 Ship attention to: Linda Ruiz Agency Contact: Name: Linda Ruiz Phone: (512) 374-6039 Email: Linda.Ruiz@hhs.texas.gov Purchaser Information: Name: Jocelynn Evans Phone #512-776-6233 Email Address: jocelynn.evans@hhs.texas.gov Vendor Contact: Robert Cross Ph: 810-235-2341 Fx: 810-235-3919 Email:rodzinaind@aol.com Rodzina Industries. Inc VID: 1382471219 3518 Fenton Rd, Flint, MI 48507

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature CPA Procurement Manual, and may be cancelled at any time in whole or part without penalty.

Invoicing and Payment: The invoice shall contain all the following in order to be considered for payment: PO number referenced, a unique invoice number, invoice date, and the total invoice amount. Each invoice shall also have an attached copy of the bill in order to be paid. Mail all original invoices to the BILL TO ADDRESS ON PO. Payment terms are net thirty days (30) unless a discount has been offered. Facility is not responsible for failure by the vendor to properly invoice which may delay payment processing.

Deliver to SHIP TO ADDRESS ON PO. Please include PO NUMBERS ON PACKING SLIPS, CARTONS, PACKAGES, BUNDLES, ETC.

Freight Terms are FOB Destination Prepaid and Allowed/Add.

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday thru Friday except designated State Holidays when the Warehouse is closed.

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Vendor:	1382471219 7 RODZINA INDUSTRIES INC 3518 FENTON RD FLINT MI 485071567 United States				ſo:	Invoice - DADS Accounts Payabl HEALTH & HUMAN SERVICES COMMISSION 424 Mesquite Dr P O Box 1132 Mexia TX 76667 United States		
				1	Fax:	254/562-1171		
				Purchaser:		Evans, Jocelynn		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM		PO Price	Extended Amt	Due Date
1-1	Notary Book and Stamp for JENNIFER REDDIK-FY23-@AuSSLC-DA711- TEXAS NORTARY SERVICE	615-60	1.00	EA		26.90000	\$26.90	12/30/2022
					Sche	dule Total	\$26.90	
					Item Total f	or Line 1	\$26.90	
2-1	Notary Embosser for JENNIFER REDDIK-@AuSSLC-DA711- TEXAS NOTARY SERVICE	615-60	1.00	EA		22.00000	\$22.00	12/30/2022
					Sche	dule Total	\$22.00	
					Item Total f	or Line 2	\$22.00	
3-1	Shipping	615-60	1.00	EA		5.00000	\$5.00	12/30/2022
					Sche	dule Total	\$5.00	
						for Line 3		
					Total PO	O Amount	\$53.90	

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.

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Authorized By ocelynn Evans 12/21/2022

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