Department of State Health Services

Purchase Order

Ship Via **Payment Terms** Freight Terms HHSTX-3-0000307931 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 01/09/23 1 conforming responses become a part of this numbered purchase order. Contractor Ship To: 1906 - Houston:5425 Polk St guarantees goods or services delivered meet or exceed numbered purchase order DEPARTMENT OF STATE HEALTH SERVICES requirements. 5425 Polk St All shipments, shipping papers, invoices, and correspondence must be identified Ste 420 with our Purchase Order Number. Houston TX 77023 United States 17419760511 Bill To: Invoice-DSHS Fiscal Claims Vendor: WORKQUEST DEPARTMENT OF STATE HEALTH SERVICES 1011 E 53RD 1/2 ST 1100 W 49th St (RBB) AUSTIN TX 787511703 PO Box 149347 **United States** 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**

FY23 Purchase / Requisition # 215002

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

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

DELIVERY: 14 Days After Receipt of PO

SMARTBUY PO

Agency Delivery Contact: Isabel Duran @ 713-767-3023 Isabel.Duran@dshs.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 # 645-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.

1.00

EA

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615-62 Commodity Code: 61593423702 -61593423702-1 Blue - Self Stick Flags, 1" x 1.7", 50 Flags/Dispenser, 2 Disp/100 Flags/Pkg. 3.06000

\$3.06 01/23/2023

Dispatch via Print

Department of State Health Services

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If advertised specification	by informal bid, Invitation for Offer, or Rec s, terms, and conditions set forth in the adve	uest for Proposa rtisement and ve	al; all endor's	Date 01/09/2	Revision		Page	
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Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States			Bill To:	Invoice-DSHS F	OF STATE HEALT (RBB)	H SERVICES	
				Fax Em		exas.gov		
				Purchas	er: Rodriguez,Linc	la 5	12/406-2533	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
					Schedule Total	\$3.06		
				I	tem Total for Line 1	\$3.06		
2-1	Shipping Fee	962-86	1.00	EA	6.00000	\$6.00	01/23/2023	
					Schedule Total	\$6.00		
				I	tem Total for Line 2	\$6.00		
3-1	Commodity Code: 61593423702 - Color: 61593423702-7 Green - Self Stick Flags, 1" x 1.7", 50 Flags/Dispenser, 2 Disp/100 Flags/Pkg	615-62	1.00	EA	3.06000	\$3.06	01/23/2023	
					Schedule Total	\$3.06		
				I	tem Total for Line 3	\$3.06		
4-1	Commodity Code: 61593423702 - Color: 61593423702-3 Red - Self Stick Flags, 1" x 1.7", 50 Flags/Dispenser, 2 Disp/100 Flags/Pkg.	615-62	1.00	EA	3.06000	\$3.06	01/23/2023	
					Schedule Total	\$3.06		
				I	tem Total for Line 4	\$3.06		
5-1	Commodity Code: 61593423702 - Color: 61593423702-6 Yellow - Self Stick Flags, 1" x 1.7", 50 Flags/Dispenser, 2 Disp/100 Flags/Pkg.	615-62	1.00	EA	3.06000	\$3.06	01/23/2023	
					Schedule Total	\$3.06		

Department of State Health Services

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specifications	by informal bid, Invitation for Offer, or Rea s, terms, and conditions set forth in the adve	ertisement and vendor's		Revision	Page 3
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Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States		Bill To:	Invoice-DSHS Fiscal C DEPARTMENT OF ST 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	TATE HEALTH SERVICES
			Fax: Email:	512/458-7442 invoices@dshs.texas.go	ov
			Purchaser:	Rodriguez,Linda	512/406-2533
Line-Sch	Inventory Item ID - Line Description	<u>Class/Item Qu</u>	antity UOM Total	PO Price E PO Amount	Extended Amt Due Date \$18.24

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	
finda Rodriguez, CTCD, CTCM	
	<u>01/10/2023</u>