

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000307980
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.			Date 01/10/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 6943 - Austin:6101 E Oltorf HEALTH & HUMAN SERVICES COMMISSION 6101 E Oltorf Austin TX 78741 United States
			Page 1

Vendor: 1043390816 6
 STAPLES CONTRACT AND COMMERCIAL LLC
 DBA STAPLES BUSINESS ADVANTAGE
 PO BOX 660409
 DALLAS TX 75266
 United States

Bill To: Invoice-HHSC Accounting
 HEALTH & HUMAN SERVICES COMMISSION
 4601 W Guadalupe St
 Austin TX 78751
 United States

Fax: 512/424-6901
Email: HHSC_AP@hhsc.state.tx.us

Purchaser: Connell, Ron Lee

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
----------	--------------------------------------	------------	----------	-----	----------	--------------	----------

FY23 General Goods

TXMAS-20-7502
 CP/X

Requisition #: HHSTX-3-0000215276
 Texas Smart Buy PO - 23072280

Requester: Wesley Guerrero
 Phone #: (512)437-8351
 Email: DDS.TX.S49.AP@ssa.gov

Ship to Attn: Wesley Guerrero, (512)437-8351, DDS.TX.S49.AP@ssa.gov

Purchaser Name: Ron Connell
 Phone #: 512-406-2666
 Email: ron.connell@hhs.texas.gov

Vendor Name: STAPLES CONTRACT COMMERCIAL
 Contact: JONATHAN MCEWEN
 Phone #: 800-574-7477
 Email: governmentteam@staples.com

Goods and/or services are to be delivered and invoiced after September 1, 2022.

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.

Health Human Services Commission
 Mail Code: 3500
 4900 N. Lamar Blvd.
 Austin, TX 78751
 Bill to Code: 3500
 Medical Social Services Division

Delivery Address:
 Disability Determination Services
 6101 E. Oltorf Street
 Austin, TX 78741
 ATTN: FM Frances Montez-Davis
 (512)437-8294

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000307980
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.			Date 01/10/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 6943 - Austin:6101 E Oltorf HEALTH & HUMAN SERVICES COMMISSION 6101 E Oltorf Austin TX 78741 United States
			Page 2

Vendor: 1043390816 6
STAPLES CONTRACT AND COMMERCIAL LLC
DBA STAPLES BUSINESS ADVANTAGE
PO BOX 660409
DALLAS TX 75266
United States

Bill To: Invoice-HHSC Accounting
HEALTH & HUMAN SERVICES COMMISSION
4601 W Guadalupe St
Austin TX 78751
United States

Fax: 512/424-6901
Email: HHSC_AP@hhsc.state.tx.us

Purchaser: Connell, Ron Lee

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
----------	--------------------------------------	------------	----------	-----	----------	--------------	----------

Contract Specialist: Dana Sherrill
Phone: (512) 206-5647
Email: Dana.Sherrill@hhs.texas.gov

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.

1-1	Sheffield Ultimate lock Back Utility Knife, Commodity Code 78545, Supplier Part 1416627	785-32	3.00	EA	11.03000	\$33.09	01/13/2023
-----	---	--------	------	----	----------	---------	------------

Schedule Total		\$33.09
Item Total for Line 1		\$33.09
Total PO Amount		\$33.09

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 	01/10/2023
--------------------------	-------------------