## **Health and Human Services Commission**

## **Purchase Order**

TX SmartBuy PO ID

**Dispatch via Print** 

Payment Te	0	Ship Via		ппстл	2 0000200724	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	ппэтх	-3-0000308721	
	by informal bid, Invitation for Offer, or R		Date	Revision	Page	
	s, terms, and conditions set forth in the ad		01/20/23		1	
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.			Ship To:	4548 - Harlingen:1401 S Rangervill HEALTH & HUMAN SERVICES COMMISSION 1401 S Rangerville Rd Harlingen TX 78552 United States		
_	All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.					
Vendor:	1561558062 6 BOB BARKER COMPANY INC PO BOX 429 FUQUAY VARINA NC 275260429 United States		Bill To:	Invoice-DSHS Accounts Payal HEALTH & HUMAN SERVI 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States		

**Fax:** 210/531-7883

Email: SAHAccounting@dshs.texas.gov

Purchaser: Torres, Joseph Ryan

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

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

DELIVERY: 3-5 days After Receipt of PO

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

Please call Agency Delivery Contact to schedule delivery 24 hours prior to arrival.

AGENCY DELIVERY CONTACT:

Rio Grande SH Taylor Gain, Whse Supvr 956-364-8321 taylor.gain@hhs.texas.gov

HHSC BUYER: Joseph Torres, Purchaser III 512-406-2413

Joseph.Torres@HHS.Texas.Gov

VENDOR:

Contact: Brock Frew 800-334-9880

customerservicecentral@bobbarker.com

OMNIA GPO and HHSC Contract # HHS000840200001

OMNIA GPO and Bob Barker Contract # WA00034777

FY23

PURCHASING METHOD: EX-0

Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

Requisition # MIM2307796; Line(s): 2,63

1-1 200-10-00001-4 200-10 161.00 EA 8.26000 \$1,329.86 01/30/2023 SWEAT PANT XL GRAY SPGY-XL

BOBBARKER

Schedule Total \$1,329.86

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conforming guarantees g requirements All shipmer	responses become a part of this numbered proods or services delivered meet or exceed n	01/20/23 Ship To:	HEALTH & HU 1401 S Rangerv	4548 - Harlingen:1401 S Rangervill HEALTH & HUMAN SERVICES COMMISSION 1401 S Rangerville Rd Harlingen TX 78552 United States			
Vendor:	1561558062 6 BOB BARKER COMPANY INC PO BOX 429 FUQUAY VARINA NC 275260429 United States			Bill To:	HEALTH & HU 6711 S New Bra Ste 100	San Antonio TX 78223	
			Fax: Email:	210/531-7883 SAHAccounting	210/531-7883 SAHAccounting@dshs.texas.gov		
				Purchaser:	Torres, Joseph	Ryan	
Line-Sch	<b>Inventory Item ID - Line Description</b>	Class/Item	Quantity	UOM	PO Price	Extended Amt	<b>Due Date</b>
				Item 1	Total for Line 1	\$1,329.86	
2-1	800-05-00014-0 SHOE SHOWER XL SZ 11-12 BOBBARKER FPVSN2-TN-XL	800-05	108.00	PR	4.01000	\$433.08	01/30/2023
					Schedule Total	\$433.08	
				Item 7	Total for Line 2	\$433.08	
				To	otal PO Amount	\$1,762.94	

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

Joseph Town, CTCD

01/20/2023