## **Health and Human Services Commission**

## **Purchase Order**

				Dispatch via Print			
Payment Terms Net 30	s Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-3-0000308777			
specifications, te	informal bid, Invitation for Offer, or Reque erms, and conditions set forth in the advertis	sement and vendor's	Date 01/23/23	Revision Page 1			
guarantees goods requirements. All shipments, s	onses become a part of this numbered purc s or services delivered meet or exceed num shipping papers, invoices, and correspon ase Order Number.	bered purchase order	Ship To:	1495 - Austin:4601 W Guadalupe St HEALTH & HUMAN SERVICES COMMISSION 4601 W Guadalupe St PO Box 13247 Austin TX 78751 United States			
	1471639236 1 PROJECTMANGER COM INC STE 200 3721 EXECUTIVE CENTER DR AUSTIN TX 787311645 United States		Bill To:	Invoice-HHSC Accounting HEALTH & HUMAN SERVICES COMMISSION 4601 W Guadalupe St Austin TX 78751 United States			
			Fax: Email:	512/424-6901 HHSC_AP@hhsc.state.tx.us			
			Purchaser:	Chavez,Rafael			
Line-Sch In	ventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extended Amt Due Date			

FY23 Funding IT/D Requisition: 0000215447

PO Service Dates: 09/30/2022 to 09/29/2023

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.

Purchase order issued in accordance with Texas Government Code §2157.068. Attached Terms and Conditions apply to this Purchase Order.

Online Project Management Software BUSINESS EDITION Prepaid Subscription Term: 12 Months Licenses: Up to 19 Cost per month: \$450.00 USD Term Date: 30 September 2022- 29 September 2023

Vendor Contact: ProjectManager.com, Inc. Brandon Houk 206-276-9887 support@projectmanager.com bhouk@projectmanager.com

Agency Contact: Michael Ghasemi 512-424-6640 michael.ghasemi@hhs.texas.gov

PCS Purchaser Contact: Steven Chavez, CTCD, CTCM 512-712-5002 Rafael.chavez@hhs.texas.gov

Invoicing and Payment: The invoice shall contain all the following 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.

## **Health and Human Services Commission**

## **Purchase Order**

Payment T	erms Freight Terms	Ship V	lia			Dispa	tch via Print	
Net 30	Prepaid & Allow	BEST		Purchase Orde	r	HHSTX-3-0	000308777	
specification	d by informal bid, Invitation for Offer, or Record, and conditions set forth in the adve	rtisement and ve	endor's	<b>Date</b> 01/23/23	Revision		<b>Page</b> 2	
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.				Ship To:	HEALTH & HU 4601 W Guadalu PO Box 13247	Austin TX 78751		
Vendor:	1471639236 1 PROJECTMANGER COM INC STE 200 3721 EXECUTIVE CENTER DR AUSTIN TX 787311645 <b>United States</b>			Bill To:	Invoice-HHSC Accounting HEALTH & HUMAN SERVICES COMMISSION 4601 W Guadalupe St Austin TX 78751 United States			
				Fax: Email:	512/424-6901 HHSC_AP@hhs	sc.state.tx.us		
				Purchaser:	Chavez,Rafael			
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
1-1	2023 Project Management Software (12 month subscription)	956-35	1.00	EA	4860.00000	\$4,860.00	01/23/2023	
				Sch	nedule Total	\$4,860.00		
				Item Tota	l for Line 1	\$4,860.00		
				Total	PO Amount	\$4,860.00		

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	
Steven Chavez, CTCD, CTCH	01/23/2023

**Dispatch via Print**