## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Net 30	FOB Dest. Prepaid & Allowed	Ship Via BEST WAY	Purchase Order	HHST	X-3-0000309191
specifications, te	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			Revision	Page 1
guarantees goods requirements. All shipments, s	onses become a part of this numbered purcha s or services delivered meet or exceed numbershipping papers, invoices, and correspondence Order Number.	ered purchase order	Ship To:	6694 - Austin:1111 W North HEALTH & HUMAN SERV 1111 W North Loop Austin TX 78756 United States	
Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States		Bill To:	Invoice-HHSC Accounting HEALTH & HUMAN SERV 4601 W Guadalupe St Austin TX 78751 United States	VICES COMMISSION
			Fax: Email:	512/424-6901 HHSC_AP@hhsc.state.tx.us	S

Purchaser: Fletcher, Patricia Rose

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

AGENCY CONTACT: Name: Brooke Milligan Phone: 512/908-8281

Email: brooke.milligan@hhs.texas.gov

PURCHASER:

Name: Patricia Fletcher Phone:512/406-2538

Email:patricia.fletcher@hhs.texas.gov

VENDOR: Name Workquest Phone: 512/451-8145

Email: smartbuy@workquest.com

Contract: 615-S1

Term 11/16/2021 - 11/30/2026

Smart Buy PO: 23084752

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

DELIVERY: 14 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 REQUIREMENTS/LIMITATIONS:

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding.

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO. FREIGHT: F.O.B. Destination Freight prepaid Allowed. Delivery hours are from 8-11:30am and 1-4:30pm M-F Except State Holidays.

Invoice per 34 TAC §20.487, amended effective May 1, 2022

1-1	2023 monthly planner	615-19	1.00	EA	17.00000	\$17.00	02/10/2023
					Schedule Total	\$17.00	
08 medical/social svcs							

Item Total for Line 1 \$17.00

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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.  All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			01/30/23	Revision Page 2
			Ship To:	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 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:	Fletcher,Patricia Rose
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extended Amt Due Date

Total PO Amount \$17.00

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 Patricia Flatcher, CIPM

01/30/2023