

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-3-0000309357
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 02/03/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 7181 - Beeville:1770 W Corpus Chri HEALTH & HUMAN SERVICES COMMISSION 1770 W Corpus Christi St P.O. Box 1388 Beeville TX 78102 United States
			Page 1

Vendor: 1741976051 1
WORKQUEST
1011 E 53RD 1/2 ST
AUSTIN TX 787511703
United States

Bill To: Invoice-HHSC-Adult Protective
HEALTH & HUMAN SERVICES COMMISSION
2520 S Veterans Blvd
PO Box 960
Edinburg TX 78539
United States

Fax: 956/316-8355
Email: reg11purchases@hhsc.state.tx.us

Purchaser: Farris,Lilly K 512/406-2452

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

FY23

AP EMAIL ADDRESS: reg11purchases@hhs.texas.gov

PROCUREMENT TYPE: Non-Competitive: EX/0 (WorkQuest)
Purchase made under the Authority of Texas Government Code 2155.441 (WorkQuest/TIBH Set-Aside)

REQUISITION #: HHSTX-3-0000218042

DELIVERY: Days After Receipt of TxSmartBuy PO #:

Deliver to 1770 W Corpus Christi St Beeville TX 78102
Inside Delivery to File Room Area between Conference Room 105 and 115
Cases will need to be brought in by dolly

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday Friday except designated State Holidays

AGENCY CONTACT:

Name: Teresa Chandler
Facility: HHSC Alice Office
Phone: 361-362-6100
Email: teresa.chandler@hhs.texas.gov

HHSC PURCHASER/BUYER:

Name: Lilly Farris CTCD
Phone: 512-406-2452
Email: lilly.farris@hhs.texas.gov

VENDOR INFORMATION:

Name: WorkQuest
Contact: Customer Service
Phone: 512-451-8145
Email Address: orders@workquest.com

QUOTE #:

TxSmartBuy PO #:
Term Contract #:
Term:

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-3-0000309357
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 02/03/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 7181 - Beeville:1770 W Corpus Chri HEALTH & HUMAN SERVICES COMMISSION 1770 W Corpus Christi St P.O. Box 1388 Beeville TX 78102 United States
			Page 2

Vendor: 1741976051 1
WORKQUEST
1011 E 53RD 1/2 ST
AUSTIN TX 787511703
United States

Bill To: Invoice-HHSC-Adult Protective
HEALTH & HUMAN SERVICES COMMISSION
2520 S Veterans Blvd
PO Box 960
Edinburg TX 78539
United States

Fax: 956/316-8355
Email: reg11purchases@hhsc.state.tx.us

Purchaser: Farris,Lilly K 512/406-2452

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

FREIGHT: F.O.B. Destination Freight Prepaid Allowed
TxSmartBuy PO #23085422 attached

1-1	Paper, Bond, Recycled, White, Prem No 4, 20 lb, Letter, commodity code/supplier p/n: 64521350104-01	645-21	40.00	CTN	48.89000	\$1,955.60	02/23/2023
-----	---	--------	-------	-----	----------	------------	------------

Schedule Total \$1,955.60

Item Total for Line 1 \$1,955.60

2-1	Inside Premium Delivery	645-21	1.00	LOT	200.00000	\$200.00	02/23/2023
-----	-------------------------	--------	------	-----	-----------	----------	------------

Schedule Total \$200.00

Item Total for Line 2 \$200.00

3-1	Lift Gate Fee	645-21	1.00	LOT	45.00000	\$45.00	02/23/2023
-----	---------------	--------	------	-----	----------	---------	------------

Schedule Total \$45.00

Item Total for Line 3 \$45.00

Total PO Amount \$2,200.60

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.

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-3-0000309357
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 02/03/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 3
			Ship To: 7181 - Beeville:1770 W Corpus Chri HEALTH & HUMAN SERVICES COMMISSION 1770 W Corpus Christi St P.O. Box 1388 Beeville TX 78102 United States

Vendor: 1741976051 1
WORKQUEST
1011 E 53RD 1/2 ST
AUSTIN TX 787511703
United States

Bill To: Invoice-HHSC-Adult Protective
HEALTH & HUMAN SERVICES COMMISSION
2520 S Veterans Blvd
PO Box 960
Edinburg TX 78539
United States

Fax: 956/316-8355
Email: reg11purchases@hhsc.state.tx.us

Purchaser: Farris,Lilly K 512/406-2452

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

Authorized By

Lilly Lannia, CTCD

02/03/2023