

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-3-0000309579
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 02/06/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
			Page 1

Vendor: 1862161688 9
ODP BUSINESS SOLUTIONS LLC
PO BOX 660113
DALLAS TX 75266-0113
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: Evans,Jocelynn

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FREIGHT: F.O.B. Destination Freight Prepaid and Allowed

DELIVERY: 7 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

Ship Attention To:
Christina Bittick

Agency Contact:
Name: Christina Bittick
Email: christina.bittick@hhs.texas.gov
Phone: 512-428-1902

Alternate Agency Contact:
Name: Joe Rainosek
Phone: 512-844-6937
Email: joe.rainosek@hhs.texas.gov

Purchaser Information:
Name: Jocelynn Evans
Phone #512-776-6233
Email Address: jocelynn.evans@hhs.texas.gov

VENDOR:
ODP BUSINESS SOLUTIONS LLC
VID: 1862161688
Email: StateofTexas@officedepot.com
Contact: Lisa Patton
713.878.2158

Omnia and Office Depot Contract Number R190303

PURCHASING METHOD: EX/0

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

REQUIREMENTS/LIMITATIONS:

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

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

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Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Requisition 0000216777							
1-1	Item #7688041 AT-A-GLANCE DayMinder 2023 RY Monthly Planner, Gray, Large, 8 1/2" x 11"	615-72	1.00	EA	19.99000	\$19.99	02/15/2023
Schedule Total						\$19.99	
Item Total for Line 1						\$19.99	
2-1	Shipping	615-60	1.00	EA	9.99000	\$9.99	02/15/2023
Schedule Total						\$9.99	
Item Total for Line 2						\$9.99	
Total PO Amount						\$29.98	

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

Jocelynn Evans, CTCD

02/08/2023