Department of State Health Services

Purchase Order

Dispatch via Print

Payment Te Net 30	erms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-	-3-0000309939
specification	by informal bid, Invitation for Offer, or I is, terms, and conditions set forth in the ac	lvertisement and vendor's	Date 02/10/23	Revision	Page 1
guarantees g requirements All shipmen	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.			1818 - Austin:1100 W 49th St (RDM) DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RDM) Ste M202 Austin TX 78756 United States	
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HI 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	EALTH SERVICES
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov	

Purchaser: Manning, Charles

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

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: 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

AGENCY CONTACT: **Beverly Collins-Moore** 512-776-2008

Beverly.CollinsMoore@dshs.texas.gov

Ship to Attn: Beverly Collins-Moore

HHSC BUYER: Charles Manning, CTCD 512-776-6840 charles.manning@hhs.texas.gov

VENDOR: South Central Supply 512-367-0311 sales@supplytexas.com

QUOTE Q15616

PURCHASING METHOD: SP/E Not to Exceed \$10,000.00

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

Requisition 217981

1-1 785-83 4.00 EA 14.99000 \$59.96 02/10/2023

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Net 30	Prepaid & Allow	BEST WAY	Purchase Order		HHSTX-3-000	
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			Purchaser:	Manning,Char		
Line-Sch 1	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
I	2.4Ghz Ppt Clicker, Support Super Url, Powerpoint Presentation Remotes R400, Jsb Control For Teching #88C7-011					
			Sche	edule Total	\$59.96	
Phone #: +1 (5	Collins-Moore					
VIN: 1900999 Phone #: 512-3	367-0311					
Email. saics@	s@supplytexas.com		Item Total	for Line 1	\$59.96	
				O Amount	\$59.96	

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	
Charles Man	
CTCO	03/09/2023