

# Health and Human Services Commission

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000310058</b>
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.			<b>Date</b> 02/13/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 2794 - San Antonio:11307 Roszell HEALTH & HUMAN SERVICES COMMISSION 11307 Roszell PO Box 23990 San Antonio TX 78217 United States
			<b>Page</b> 1

**Vendor:** 1862161688 9  
ODP BUSINESS SOLUTIONS LLC  
PO BOX 660113  
DALLAS TX 75266-0113  
United States

**Bill To:** Invoice-HHSC Region 8, Inspect  
HEALTH & HUMAN SERVICES COMMISSION  
11307 Roszell  
PO Box 23990  
San Antonio TX 78217  
United States

**Fax:** 210/619-8272  
**Email:** Reg08\_Admin\_Services@hpsc.state.tx.us

**Purchaser:** Mcurtray,Nicole

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

AGENCY CONTACT:  
JOHN TRUDELL  
(210-326-1695)  
JOHN.TRUDELL@HHS.TEXAS.GOV

Purchaser Information  
Name: Nikki McMurtray  
Email: N kki.McMurtray@hhs.texas.gov  
Phone: 512-776-6190

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

Requisition 212405

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**Purchaser:** Mcmurtray,Nicole

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
1-1	Office Depot® Brand 6" x 9" Manila Envelopes, Clasp Closure, Brown Kraft, Box Of 100 Item # 330744	310-06	43.00	BOX	6.56000	\$282.08	02/20/2023	
<b>Schedule Total</b>						\$282.08		
Attn To: John Trudell							<b>Item Total for Line 1</b>	\$282.08
2-1	Office Depot® Brand 10" x 13" Manila Envelopes, Clasp Closure, Brown Kraft, Box Of 100 Item # 330888	310-06	32.00	BOX	11.02000	\$352.64	02/20/2023	
<b>Schedule Total</b>						\$352.64		
Attn To: John Trudell							<b>Item Total for Line 2</b>	\$352.64
<b>Total PO Amount</b>						\$634.72		

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.

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**Authorized By**

*Mikki Montgomery, CEO, CCM*

**02/13/2023**