Purchase Order

Dispatch via Print

Payment Te	8	Ship Via		11110TV 0 000004407	,_
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-3-000031107	<u>5</u>
	by informal bid, Invitation for Offer, or R		Date	Revision Pag	ge
	s, terms, and conditions set forth in the ad		03/01/23		1
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.			Ship To:	1907 - Harlingen:601 W Sesame Dr DEPARTMENT OF STATE HEALTH SERVICES 601 W Sesame Dr Harlingen TX 78550 United States	
Vendor:	1453328644 0 AMAZON CAPITAL SERVICES IN PO BOX 35184 SEATTLE WA 981245185 United States	C	Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov	

Purchaser:

UOM

Mills, George M

Extended Amt

Due Date

PO Price

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

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

Inventory Item ID - Line Description

DELIVERY: 3-7 Days After Receipt of PO

Line-Sch

DELIVERY: Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday - Friday except designated State Holidays when the Warehouse is closed.

Quantity

Please call Agency Delivery Contact to schedule delivery 24 hours prior to arrival.

Please follow the Texas Comptroller's Invoicing standards as seen below.

Include PO Number on invoices, bills, receipts, bill lading, packing slips, and back order.

(a) To receive payment, a contractor must submit an invoice to the State Agency receiving the goods or services.

Class/Item

The invoice should include, but is not limited to including:

- (1) the contractor's mailing and e-mail (if applicable) address.
- (2) the contractor's telephone number.
- (3) the name and telephone number of a person designated by the contractor to answer questions regarding the invoice.
- (4) the state agency's name, agency number, delivery address.
- (5) the state agency's purchase order number, if applicable.
- (6) the contract number or other reference number, if applicable.
- (7) a valid Texas identification number (TIN) issued by the Comptroller.
- (8) a description of the goods or services, in sufficient detail to identify the order which relates to the invoice.
- (9) unit numbers corresponding to the amount of the invoice.
- (10) if submitting an invoice after receiving an assignment of a contract, the TIN of the original contractor and the TIN of the successor vendor.
- (11) other relevant information supporting and explaining the payment requested.

Warehouse: Please deliver to bldg. 800

AGENCY CONTACT:

Requester Name: Keith, Raven Lynn

Requester Phone Number/Area Code: 1 (956) 421-5511 Requester E-mail Address: Raven.Keith@dshs.texas.gov

Contract Manager Name: Contract Manager Email: Contract Manager Phone:

Ship to Attn: Keith, Raven Lynn

Phone Number/Area Code: 1 (956) 421-5511 E-mail Address: Raven.Keith@dshs.texas.gov

Building and Room number

Purchase Order

Dispatch via Print

Payment Te	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-0000311075	
specifications	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 2	
guarantees go 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.		Ship To:	1907 - Harlingen:601 W Sesame Dr DEPARTMENT OF STATE HEALTH SERVICES 601 W Sesame Dr Harlingen TX 78550 United States	
Vendor:	1453328644 0 AMAZON CAPITAL SERVICES INC PO BOX 35184 SEATTLE WA 981245185 United States		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov	

Quantity

Purchaser:

UOM

bldg. TEXAS DEPT OF STATE HEALTH SERVICE

601 W Sesame Dr Harlingen TX 78550 United States

Warehouse: Please deliver to bldg.

HHSC BUYER:

George Mills, CTCD, Ph 512-406-2651, Fax 512-406-2695,

Inventory Item ID - Line Description

email George.Mills@hhs.texas.gov

VENDOR:

Line-Sch

Vendor Name: AMAZON CAPITAL SERVICES INC

SEATTLE, WA 981245185

United States

PLEASE HAVE VENDORS SEND INVOICES to

PO BILL TO INFORMATION

QUOTE:

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.

Class/Item

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

Requisition 0000219872

1-1 485-46 1.00 EA 29.97000 \$29.97 03/02/2023 COMMERCIAL PAPER TOWL DISPENSER WALL MOUNT

Schedule Total \$29.97

Mills, George M

Extended Amt

Due Date

PO Price

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-000031107	7 5
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			Date 03/01/23	Revision Pa	age 3
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.			Ship To:	1907 - Harlingen:601 W Sesame Dr DEPARTMENT OF STATE HEALTH SERVICES 601 W Sesame Dr	
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				Harlingen TX 78550 United States	
Vendor: 145	53328644 0		Bill To:	Invoice-DSHS Fiscal Claims	

AMAZON CAPITAL SERVICES INC

PO BOX 35184

SEATTLE WA 981245185

United States

DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

Fax: 512/458-7442 **Email:** invoices@dshs.texas.gov

				Pur	chaser: Mills,Geor	ge M	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
					Item Total for Line 1	\$29.97	
2-1		165-30	4.00	EA	11.99000	\$47.96	03/02/2023
	JEGS Magnetic Glove and Tissue Dispenser 8 LBS Capacity Pre-Drilled For Optional Wall Mounting Powder Coated Black						
					Schedule Total	\$47.96	
					Item Total for Line 2	\$47.96	
3-1	MEDLINE SHARPS CONTAINER CABINET	340-08	1.00	EA	99.49000	\$99.49	03/02/2023
					Schedule Total	\$99.49	
					Item Total for Line 3	\$99.49	
4-1	HONEYWELL HOME CG510A THERMOSTAT GUARD	340-08	1.00	EA	18.17000	\$18.17	03/02/2023
					Schedule Total	\$18.17	
					Item Total for Line 4	\$18.17	
5-1	ESTIMATED SHIPPING	962-86	1.00	EA	14.99000	\$14.99	03/02/2023
					Schedule Total	\$14.99	
03/01/2023	Estimated Shipping form \$100.00 to \$14.99.	GM			Item Total for Line 5	\$14.99	
					Total PO Amount	\$210.58	

Purchase Order

Dispatch via Print

Payment To Net 30	erms Freight Terms Prepaid & Allow	Ship V BEST V		Purchase Order	HHSTX-3-0000311075
specification	d by informal bid, Invitation for Offer, or R ns, terms, and conditions set forth in the adv	vertisement and ver	Date 03/01/23	Revision Page	
guarantees g requirement All shipmer	responses become a part of this numbered goods or services delivered meet or exceed s. nts, shipping papers, invoices, and corresponded or Number.	numbered purchase	Ship To:	1907 - Harlingen:601 W Sesame Dr DEPARTMENT OF STATE HEALTH SERVICES 601 W Sesame Dr Harlingen TX 78550 United States	
Vendor:	1453328644 0 AMAZON CAPITAL SERVICES IN PO BOX 35184 SEATTLE WA 981245185 United States	С		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States
				Fax: Email:	512/458-7442 invoices@dshs.texas.gov
				Purchaser:	Mills,George M
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price Extended Amt Due Date

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

03/01/2023