## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Terms Net 30	Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	Н	HSTX-3-0000311331
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.  All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			<b>Date</b> 03/06/23	Revision	Page 1
			Ship To:	4549 - San Antonio:6711 S New Brau HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100	
W1011 V011 1 011 01101				San Antonio TX 7822 United States	3
Vendor:	1453328644 0		Bill To:	Invoice-DSHS Accoun	nts Payable

AMAZON CAPITAL SERVICES INC

PO BOX 35184

SEATTLE WA 981245185

**United States** 

HEALTH & HUMAN SERVICES COMMISSION

6711 S New Braunfels

Ste 100

San Antonio TX 78223

United States

Fax: 210/531-7883

Email: SAHAccounting@dshs.texas.gov

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

FY23 General Goods

Spot Purchase Open Market

SP/E

Line-Sch

Requisition #: HHSTX-3-0000220474

Requester Name: Margaret Moreno

Phone #: 210-531-7718

Email: margaret.moreno@hhs.texas.gov

SHIP TO ATTN: Margaret Moreno, 210-531-7718, margaret.moreno@hhs.texas.gov

Purchaser Name: Ron Connell Phone #: 512-406-2666

Email: ron.connell@hhs.texas.gov

Vendor Name: AMAZON CAPITAL SERVICES INC

Contact: Customer Service Phone #: 1-888-280-4331

Email: ar-businessworkbench@amazon.com

Goods and/or services are to be delivered and invoiced after September 1, 2022.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature CPA Procurement Manual, and may be cancelled at any time in whole or part without penalty.

50 oanosino a cany into in wino o part winoat ponate.

Info for Warehouse staff: Delivery Contact: Tonya Holder Phone #: 210-531-7357

Email: Tonya.holder@hhs.texas.gov

Bldg/Floor/Cubicle: Bonham Hall Nurses Station

Invoicing and Payment: The invoice shall contain all the following in order to be considered for payment: PO number referenced, a unique invoice number, invoice date, and the total invoice amount. Each invoice shall also have an attached copy of the bill in order to be paid. Mail all original invoices to the BILL TO ADDRESS ON PO. Payment terms are net thirty days (30) unless a discount has been offered. Facility is not responsible for failure by the vendor to properly invoice which may delay payment processing.

## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Ter Net 30	rms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order		HHSTX-3-0000311331
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.  All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			<b>Date</b> 03/06/23	Revision	Page 2
			Ship To:	4549 - San Antonio:6711 S New Brau HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States	
Vendor:	1453328644 0 AMAZON CAPITAL SERVICES INC PO BOX 35184 SEATTLE WA 981245185	C	Bill To:	Invoice-DSHS Ac HEALTH & HUM 6711 S New Braun Ste 100	MAN SERVICES COMMISSION

**Fax:** 210/531-7883

Email: SAHAccounting@dshs.texas.gov

United States

San Antonio TX 78223

Connell,Ron Lee Purchaser: Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity **UOM** PO Price **Extended Amt Due Date** 1-1 595-40 4.00 EA 258.57000 \$1,034.28 03/09/2023 VegTrug 1.8m wooden raised bed planter \$1,034.28 Schedule Total Item Total for Line 1 **Total PO Amount** \$1,034.28

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.

**United States** 

Authorized By	
Reef.	03/06/2023