

# Health and Human Services Commission

## Purchase Order

**TX SmartBuy PO ID**

**Dispatch via Print**

|  |   |                             |   |
|--|---|-----------------------------|---|
| <b>Payment Terms</b><br>Net 30   | <b>Freight Terms</b><br>Prepaid & Allow | <b>Ship Via</b><br>BEST WAY | <b>Purchase Order</b><br><b>HHSTX-3-0000311572</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><br>03/08/23   |
| <b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>   |   |                             | <b>Revision</b><br>Page<br>1  |
|  |   |                             | <b>Ship To:</b><br>6433 - Carlsbad: 11640 US Hwy 87 N<br>HEALTH & HUMAN SERVICES COMMISSION<br>11640 US Hwy 87 N<br>11640 N US Hwy 87<br>Carlsbad TX 76934<br>United States |

**Vendor:** 1752438342 3  
PRODUCTS UNLIMITED INC  
PO BOX 339  
JUSTIN TX 762470339  
**United States**

**Bill To:** Invoice - DADS  
HEALTH & HUMAN SERVICES COMMISSION  
2501 Maple St  
PO Box 451  
Abilene TX 79602  
United States

**Fax:** 325/795-3807  
**Email:** 710Accounting@hhsc.state.tx.us

**Purchaser:** Martinez, Travis

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

SP/E - Spot Purchase Up to \$10,000.00  
SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: 14 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:  
Whse Supvr Danny Melvin  
Ph - 325-465-2266  
danny.melvin@hhs.texas.gov  
Reg Mgr Jessica Jackson

HHSC BUYER:  
Travis Martinez CTCD  
512-438-5685  
Travis.martinez@hhs.texas.gov

VENDOR:  
Products unlimited  
Susan Raithel  
940-648-3073 x 100  
sraithel@products-unlimited.com

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 mim2311547 line 41

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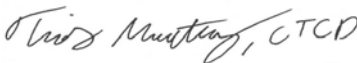
**Purchaser:** Martinez, Travis

| Line-Sch                     | Inventory Item ID - Line Description  | Class/Item | Quantity | UOM | PO Price | Extended Amt | Due Date   |
|------------------------------|---|------------|----------|-----|----------|--------------|------------|
| 1-1                          | 652-42-00301-0<br>CURL ACTIVATOR 8OZ 6/CS SFTE<br>SPOT PROD UNLMTD 80008920 | 652-42     | 10.00    | CS  | 11.12000 | \$111.20     | 03/22/2023 |
| <b>Schedule Total</b>        |   |            |          |     |          | \$111.20     |            |
| <b>Item Total for Line 1</b> |   |            |          |     |          | \$111.20     |            |
| <b>Total PO Amount</b>       |   |            |          |     |          | \$111.20     |            |

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.

|  |                   |
|--|-------------------|
| <b>Authorized By</b><br> | <b>03/08/2023</b> |
|--|-------------------|