Health and Human Services Commission

Purchase Order

Dispatch via Print

| Payment Terms Net 30 | Freight Terms Prepaid & Allow | Ship Via BEST WAY | Purchase Order | НН | STX-3-0000311605 | |
|--|---|--|----------------|---|------------------|--|
| If advertised by infi | ormal bid, Invitation for Offer, or Fas, and conditions set forth in the ac | Request for Proposal; all Ivertisement and vendor's | Date 03/08/23 | Revision | Page 1 | |
| guarantees goods o requirements. All shipments, shi | 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: | 5030 - Terrell:1200 E Brin HEALTH & HUMAN SERVICES COMMISSION 1200 E Brin PO Box 70 Terrell TX 75160 United States | | |
| Vendor: 19 | 900999880 8 | | Bill To: | Terrell SH Whse | | |

SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117

United States

HEALTH & HUMAN SERVICES COMMISSION

1200 E Brin PO Box 70 Terrell TX 75160 United States

Email: DSHS.TSHBusinessOffice@dshs.texas.gov

Purchaser: Breest, Maria Ana

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

SP/E - Spot Purchase Up to \$10,000.00 840/62

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

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

DELIVERY: 10 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

SEND INVOICES TO: DSHS.TSHBusinessOffice@dshs.texas.gov

LEAD Contact: TAMBRIN RIVERS Lead Contact phone: 972-551-8262

Lead Contact Email: tambrin.rivers@hhs.texas.gov

Contract Specialist: Casen Krause

CS Phone: 512-786-0726

CS Email: casen.krause@hhs.texas.gov

Regional Contract: Stephany VanBolden Regional CM Phone#: 972-551-8563

Regional CM Email: Stephany.vanbolden@hhs.texas.gov

HHSC BUYER:

Ana Breest, CTCD, CTCM

512-406-2679

ana.breest@hhs.texas.gov

VID: 1900999880800

South Central Supply

Hope Craft

sales@supplytexas.com

(512) 367 0311

Quote:Q16447

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, 2023

Requisition: 0000218062

Health and Human Services Commission

Purchase Order

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| Payment Te | rms Freight Terms | Ship Via | | | | |
|---|--|--------------------------|----------------|---|----|--|
| Net 30 | Prepaid & Allow | BEST WAY | Purchase Order | HHSTX-3-000031160 | 15 | |
| If advertised | by informal bid, Invitation for Offer, or R | equest for Proposal; all | Date | Revision Pa | ge | |
| | s, terms, and conditions set forth in the ad- | | 03/08/23 | | 2 | |
| 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: | 5030 - Terrell:1200 E Brin HEALTH & HUMAN SERVICES COMMISSION 1200 E Brin PO Box 70 Terrell TX 75160 United States | | |
| Vendor: | 1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States | | Bill To: | Terrell SH Whse HEALTH & HUMAN SERVICES COMMISSION 1200 E Brin PO Box 70 Terrell TX 75160 United States | | |
| | | | Email: | DSHS.TSHBusinessOffice@dshs.texas.gov | | |

| Line-Sch | Language Many ID. Line Description | Class/I4sss | 0 | | chaser: Breest,Mar | | Dece Dete |
|----------|---|-------------|----------|-----|-----------------------|--------------|------------|
| Line-Scn | Inventory Item ID - Line Description | Class/Item | Quantity | UOM | PO Price | Extended Amt | Due Date |
| 1-1 | TCL - 85" Class 4-Series 4K UHD HDR Smart Roku TV Model:85S455 SKU:6500477 | 840-62 | 1.00 | EA | 1179.00000 | \$1,179.00 | 03/08/2023 |
| | | | | | Schedule Total _ | \$1,179.00 | |
| | | | | | Item Total for Line 1 | \$1,179.00 | |
| 2-1 | TCL - 65" Class 4-Series 4K UHD HDR Smart Roku TV Model:65S455 SKU:6500473 | 840-62 | 1.00 | EA | 449.99000 | \$449.99 | 03/08/2023 |
| | | | | | Schedule Total _ | \$449.99 | |
| | | | | | Item Total for Line 2 | \$449.99 | |
| | | | | | Total PO Amount | \$1,628.99 | |

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.

Health and Human Services Commission

Purchase Order

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| Payment To Net 30 | erms Freight Terms Prepaid & Allow | Ship Via BEST W | | Purchase Order | Н | HSTX-3-00 | 00311605 |
|--|--|---------------------|----------|----------------------|--|-------------------|------------------|
| specification | by informal bid, Invitation for Offer, or Rons, terms, and conditions set forth in the adv | vertisement and ven | dor's | Date 03/08/23 | Revision | | Page 3 |
| guarantees g requirement All shipmer | responses become a part of this numbered goods or services delivered meet or exceed s.s. nts, shipping papers, invoices, and corresponded or Number. | numbered purchase | order | Ship To: | 5030 - Terrell:1200 I HEALTH & HUMAI 1200 E Brin PO Box 70 Terrell TX 75160 United States | | MMISSION |
| Vendor: | 1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States | | | Bill To: | Terrell SH Whse HEALTH & HUMAI 1200 E Brin PO Box 70 Terrell TX 75160 United States | N SERVICES CO | MMISSION |
| | | | | Email: | DSHS.TSHBusinessO | Office@dshs.texas | .gov |
| Line-Sch | Inventory Item ID - Line Description | Class/Item | Ouantity | Purchaser: UOM | Breest,Maria Ana PO Price | Extended Amt | Due Date |

Authorized By

MBrust CTCD,CTOM

03/09/2023