Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	TX-3-0000311657	
specifications, terms	rmal bid, Invitation for Offer, or s, and conditions set forth in the a	dvertisement and vendor's	Date 03/09/23	Revision	Page 1	
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:	To: 0011 - Abilene:4601 S 1st St HEALTH & HUMAN SERVICES COMMISSION 4601 S 1st St		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			PO Box 521 Abilene TX 79605 United States			
	-24 -44 -500 -0					

Vendor: 1862161688 9

ODP BUSINESS SOLUTIONS LLC

PO BOX 660113 DALLAS TX 75266-0113

United States

Bill To: Invoice-HHSC Accounting

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

Purchaser: Connell,Ron Lee

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

FY23 General Goods

Spot Purchase Open Market

SP/E

Requisition #: HHSTX-3-0000220679

Requester: Sherri Martinez Phone #: 512-663-7095

Email: Sherri.Martinez@hhs.texas.gov

SHIP TO ATTN: Debra Young, +1 (325) 795-5704, Debra. Young@hhs.texas.gov

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

Email: ron.connell@hhs.texas.gov

Vendor Name: ODP Business Solutions

Contact: Customer Service Phone #: (512) 422-7329

Email: StateofTexas@OfficeDepot.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.

Omnia and Office Depot Contract Number # R190303 Omnia Office Depot HHS Account Number # 46319643

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.

1-1 345-32 1.00 EA 25.21000 \$25.21 03/16/2023

Purchase Order

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Net 30 Prepaid & Allow BEST WAY 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		Purchase Order Date 03/09/23	Revision Pa		
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Vendor: 1862161688 9

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4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

Connell,Ron Lee Purchaser: Inventory Item ID - Line Description Class/Item Quantity UOM Line-Sch PO Price Extended Amt Due Date FIRST AID KIT Schedule Total \$25.21 Item Total for Line 1 _____\$25.21 605-55 1.00 EA 60.55000 \$60.55 03/16/2023 2-1 WESTCOTT® CARBOTITANIUM GUILLOTINE HEAVY-DUTY TRIMMER, 12", WHITE/GREEN Schedule Total \$60.55 Item Total for Line 2 \$60.55 95.10000 3-1 641-75 1.00 C36 \$95.10 03/16/2023 KLEENEX® PROFESSIONAL 2-PLY UPRIGHT BOX TISSUE, CASE OF 36 BOXES Schedule Total \$95.10 Item Total for Line 3 \$95.10 4-1 045-20 1.00 EA 169.99000 \$169.99 03/16/2023 KEURIG K-ELITE SINGLE-SERVE K-CUP POD COFFEE MAKER, BRUSHED SILVER Schedule Total \$169.99 Item Total for Line 4 \$169.99 5-1 393-40 1.00 B24 12.28000 \$12.28 03/16/2023 TWININGS® OF LONDON PURE PEPPERMINT TEA SINGLE-SERVE K-CUP® PODS, 0.11 OZ, BOX OF 24 Schedule Total \$12.28 Item Total for Line 5 \$12.28

Purchase Order

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Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	TX-3-0000311657	
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with our Purchase (Order Number.			Abilene TX 79605 United States		

Vendor: 1862161688 9

ODP BUSINESS SOLUTIONS LLC

PO BOX 660113 DALLAS TX 75266-0113

United States

Bill To:

Invoice-HHSC Accounting HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

Fax:

512/424-6901 HHSC_AP@hhsc.state.tx.us Email:

				Purc	haser: Connell,Ron Le	e	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
6-1	TWININGS® OF LONDON, GREEN TEA SINGLE-SERVE K-CUP® PODS, BOX OF 24	393-40	1.00	B24	12.29000	\$12.29	03/16/2023
					Schedule Total	\$12.29	
					Item Total for Line 6	\$12.29	
7-1	EXECUTIVE SUITE® COFFEE SINGLE-SERVE COFFEE K-CUP® PODS, VARIETY PACK, CARTON OF 70	393-40	1.00	CTN	23.73000	\$23.73	03/16/2023
					Schedule Total	\$23.73	
					Item Total for Line 7	\$23.73	
8-1	CELESTIAL SEASONINGS® SINGLE-SERVE K-CUP® PODS, ORIGINAL INDIA SPICE CHAI TEA, BOX OF 24	393-40	1.00	B24	13.59000	\$13.59	03/16/2023
					Schedule Total	\$13.59	
					Item Total for Line 8	\$13.59	
9-1	DIXIE® COFFEE STIRRERS, BOX OF 1,000 STIRRERS	240-63	1.00	CM	3.80000	\$3.80	03/16/2023
					Schedule Total	\$3.80	
					Item Total for Line 9	\$3.80	
10-1	POST-IT® SUPER STICKY NOTES, 4 IN X 4 IN, ENERGY BOOST COLLECTION, LINED, PACK OF 6	615-62	4.00	P06	12.97000	\$51.88	03/16/2023

Purchase Order

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Payment Terms	Freight Terms	Ship Via			0.000004405
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSIX	-3-0000311657
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 03/09/23	Revision	Page 4
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:	0011 - Abilene:4601 S 1st St HEALTH & HUMAN SERVIO 4601 S 1st St PO Box 521 Abilene TX 79605 United States	CES COMMISSION

Vendor: 1862161688 9

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HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

Connell,Ron Lee Purchaser: Inventory Item ID - Line Description Class/Item Quantity UOM Line-Sch PO Price Extended Amt Due Date PADS Schedule Total \$51.88 Item Total for Line 10 11-1 240-93 1.00 EA 29.99000 \$29.99 03/16/2023 MIND READER ANCHOR TRIPLE-DRAWER COFFEE POD HOLDER, SILVER Schedule Total \$29.99 Item Total for Line 11 \$29.99 21.59000 12-1 615-19 1.00 EA \$21.59 03/16/2023 CAMBRIDGE VIENNA 2023 RY WEEKLY MONTHLY PLANNER, LARGE, 8 1/2" X 11" Schedule Total \$21.59 Item Total for Line 12 \$21.59 13-1 615-19 1.00 EA 23.03000 \$23.03 03/16/2023 AT-A-GLANCE DAYMINDER 2023 RY BLOCK STYLE WEEKLY PLANNER, BLACK, MEDIUM, 7" X 8 Schedule Total \$23.03 Item Total for Line 13 \$23.03 14-1 393-40 1.00 C24 15.60000 \$15.60 03/16/2023 GREEN MOUNTAIN COFFEE® SINGLE-SERVE COFFEE K-CUP® PODS, HAZELNUT, CARTON OF 24 Schedule Total \$15.60 Item Total for Line 14 \$15.60

Purchase Order

Dispatch via Print

Payment Terr	ns Freight Terms	Ship Via			
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHST	X-3-0000311657
specifications,	y informal bid, Invitation for Offer, or R terms, and conditions set forth in the ad	vertisement and vendor's	Date 03/09/23	Revision	Page 5
	sponses become a part of this numbered ds or services delivered meet or exceed		Ship To:	0011 - Abilene:4601 S 1st St HEALTH & HUMAN SERV 4601 S 1st St	
	, shipping papers, invoices, and corres hase Order Number.	spondence must be identified		PO Box 521 Abilene TX 79605 United States	
Vendor:	1862161688 9		Bill To:	Invoice-HHSC Accounting	HCEC COMMISSION

ODP BUSINESS SOLUTIONS LLC

PO BOX 660113 DALLAS TX 75266-0113

United States

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

Purchaser: Connell,Ron Lee Line-Sch Class/Item **Inventory Item ID - Line Description** Quantity **UOM** PO Price **Extended Amt Due Date** 15-1 393-40 1.00 B24 15.90000 \$15.90 03/16/2023 GREEN MOUNTAIN COFFEE® SINGLE-SERVE COFFEE K-CUP® PODS, CARAMEL VANILLA CREAM, CARTON OF 24 Schedule Total \$15.90 Item Total for Line 15 \$15.90 \$574.53 Total PO Amount

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	
Reef.	03/10/2023