

Health and Human Services Commission

Purchase Order

TX SmartBuy PO ID

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000312247
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.			Date 03/16/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
		Ship To:	5030 - Terrell:1200 E Brin HEALTH & HUMAN SERVICES COMMISSION 1200 E Brin PO Box 70 Terrell TX 75160 United States

Vendor: 1561558062 6
BOB BARKER COMPANY INC
PO BOX 429
FUQUAY VARINA NC 275260429
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

Purchaser: Reyes,Jeffrey Alexander

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FREIGHT: F.O.B Destination Freight Prepaid and 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 when the Warehouse is closed.

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

AGENCY DELIVERY CONTACT:

Whse Supvr Robert Horton
Ph - 972-551-8864
robert.horton@hhs.texas.gov
Reg Mgr Charles Barrett

HHSC BUYER:

Jeffrey Reyes CTCD
Jeffrey.reyes@tea.texas.gov

VENDOR:

Bob Barker
Contact: Brock Frew
Ph: 1-800-334-9880
Email: customerservicecentral@bobbarker.com

FY23

OMNIA GPO and HHS Contract # HHS000840200001

OMNIA GPO and Bob Barker Contract # WA00034777

PURCHASING METHOD: EX-0

Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

Requisition #MIM2313562 lines 3,5,6,7

1-1	200-10-00001-2 SWEAT PANT MED GRAY SPGY-M	200-10	48.00	EA	8.26000	\$396.48	03/30/2023
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BOBBARKER							
Schedule Total						\$396.48	
Item Total for Line 1						\$396.48	
2-1	201-87-25522-7 BRIEF MEN MED 34-36 PLY/CTN BOBBARKER EBRLS-M	201-87	12.00	DZ	19.49000	\$233.88	03/30/2023
Schedule Total						\$233.88	
Item Total for Line 2						\$233.88	
3-1	201-87-25550-8 BRIEF MEN 2XL 46-48 PLY/CTN BOBBARKER EBRLS-2XL	201-87	12.00	DZ	22.12000	\$265.44	03/30/2023
Schedule Total						\$265.44	
Item Total for Line 3						\$265.44	
4-1	201-87-25551-0 BRIEF MEN 3XL 50-52 PLY/CTN BOBBARKER EBRLS-3XL	201-87	12.00	DZ	22.12000	\$265.44	03/30/2023
Schedule Total						\$265.44	
Item Total for Line 4						\$265.44	
Total PO Amount						\$1,161.24	

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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

Jeffrey A. Reyes, CTCD

03/16/2023