Department of State Health Services

Purchase Order

Dispatch via Print

Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHS	ГХ-3-0000312314
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.			Date 03/17/23	Revision	Page 1
			Ship To:	hip To: 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States	
Vendor:	Vendor: 1752745586 3 DARLA CLOUD DBA CLOUD TRAINING SERVICES PO BOX 94686 LUBBOCK TX 794934686 United States		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov	
			Purchaser:	Alba,Yvonne E	512/406-2416

FY23 funding Requisition 0000219617 PO Service Dates 3-17-2023 to 08-31-2023

Attached Terms and Conditions apply to this Purchase Order.

Inventory Item ID - Line Description

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2023 are automatically canceled.

Quantity

UOM

PO Price

Extended Amt

Due Date

Class/Item

Vendor contact Darla Cloud PO Box 94686 Lubbock, TX 79493-4686 806-793-3301 Darlacloud@cloudtraining.com

Agency contact Gabriela Soto gabriela.soto@dshs.texas.gov

PCS contact Yvonne Alba 512-406-2416

Line-Sch

1.00 EA 299.00000 1-1 924-16 \$299.00 03/30/2023 Excel to the Max ONLINE (2 Day Class) - 04/18 - 19/2023 Registration - Camille Porter \$299.00 Schedule Total \$299.00 Item Total for Line 1 199.00000 \$199.00 03/30/2023 2-1 924-16 1.00 EA Excel The Business Professional

ONLINE (single day class) - 04/17/2023, Registration for Camille Porter

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guarantees g requirement All shipmer	responses become a part of this numbered purpoods or services delivered meet or exceed nuss. s. tts, shipping papers, invoices, and correspurchase Order Number.	Snip 10:	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States			
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			Purchaser:	Alba,Yvonne E	512	2/406-2416
Line-Sch	Inventory Item ID - Line Description	Class/Item Qua	ntity UOM	PO Price	Extended Amt	Due Date
			Sche	edule Total	\$199.00	
		Item Total	for Line 2	\$199.00		
			Total P	O Amount	\$498.00	

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.

Payment Terms

Freight Terms

Authorized By
Yvonne alba, CTCD, CTCM
03/17/2023