Department of State Health Services

Purchase Order

Dispatch via Print

Payment To Net 30	erms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-0000312389
specification	d by informal bid, Invitation for Offer, or I ns, terms, and conditions set forth in the ac	lvertisement and vendor's	Date 03/17/23	Revision Page 1
guarantees g requirement All shipmer	responses become a part of this numbered goods or services delivered meet or exceed ts. nts, shipping papers, invoices, and corre- urchase Order Number.	numbered purchase order	Ship To: d	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 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:	Vasquez lii,Richard
Line-Sch	Inventory Item ID - Line Description	Class/Item Quanti	ty UOM	PO Price Extended Amt Due Date

SP/E

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

AGENCY CONTACT: Shanta Khadka shanta.khadka@dshs.texas.gov Telephone not provided by requester.

HHSC BUYER: Richard Vasquez richard.vasqueziii@hhs.texas.gov 512-639-7327

VENDOR: South Central 828 Betterman Drive Pflugerville Texas 78660 VID: 1900999880800 sales@supplytexas.com (512) 367 - 0311

QUOTE 16603

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 220593

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specification	s, terms, and conditions set forth in the adve	rtisement and ve	endor's	03/1	7/23			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				Ship			- Austin:1111 W North Loop	
						HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop		
						Austin TX 78756		
with our Pu	rchase Order Number.					United States		
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States			Bill	То:	Invoice-DSHS 1 DEPARTMEN 1100 W 49th St PO Box 149347 Austin TX 7875 United States	Γ OF STATE HEALT (RBB) '	H SERVICES
					Fax: Email:	512/458-7442 invoices@dshs.	texas.gov	
					chaser:	Vasquez lii,Ri		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM		PO Price	Extended Amt	Due Date
1-1	Heat Laminating Pouches 11-1/2X9in PK 100	665-41	3.00	EA		37.99000	\$113.97	04/07/2023
					Sched	lule Total	\$113.97	
					Item Total fo	or Line 1	\$113.97	
2-1	Caution Sigh Watch For lift Trucks 5in H	801-83	2.00	EA		3.92000	\$7.84	04/07/2023
					Sched	lule Total	\$7.84	
					Item Total f	or Line 2	\$7.84	
3-1	Microfiber Cloth 12X16 Assorted PK12	735-60	3.00	EA		16.98000	\$50.94	04/07/2023
					Sched	lule Total	\$50.94	
https://www	.txsmartbuy.com/product/6464599				Item Total fo	or Line 3	\$50.94	
4-1	Duster with Folding Handle 22 L	485-94	6.00	EA		15.99000	\$95.94	04/07/2023
	-				Sched	lule Total	\$95.94	
https://www	.txsmartbuy.com/product/6464777				Itom Total f	or Line 4	\$95.94	
					item fotal fo	or Line 4	\$93.94	
5-1	Cool Dry Hi Vis Vest Class 2XL LIme	345-92	1.00	EA		19.85000	\$19.85	04/07/2023
					Sched	lule Total	\$19.85	
https://www	.txsmartbuy.com/product/6408997				Item Total f	or Line 5	\$19.85	

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Net 30	Prepaid & Allow	BEST		Purchase Order		HHSTX-3-0000312389	
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Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States			Bill To:	Invoice-DSHS DEPARTMEN 1100 W 49th S PO Box 14934 Austin TX 787 United States	NT OF STATE HEALTH SERVICES St (RBB) 17	
				Fax: Email:	512/458-7442 invoices@dshs	s.texas.gov	
				Purchaser:	Vasquez lii,R	ichard	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt Due Date	
6-1	G7368 Coated Gloves Full 2XL 11 PR	345-48	4.00	EA	10.58000	\$42.32 04/07/2023	
				Sche	dule Total	\$42.32	
https://www	.txsmartbuy.com/product/6565762			Item Total	for Line 6	\$42.32	
				Total P	O Amount	\$330.86	

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	
1	luchel Vasque To crco, crcm	
1		<u>03/30/2023</u>

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