

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000312411
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 03/17/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 2053 - Austin:8317 Cross Park Dr HEALTH & HUMAN SERVICES COMMISSION 8317 Cross Park Dr PO Box 149347 350 Austin TX 78754 United States
			Page 1

Vendor: 1223695478 5
SHI GOVERNMENT SOLUTIONS INC
STE 375
1301 S MO PAC EXPY
AUSTIN TX 787466916
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@hpsc.state.tx.us

Purchaser: Prince,Sheana Denea 512/406-2548

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

FY23 Funding
IT/D
Requisition: 219581

Quote #: 23234487

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.

Purchase order issued in accordance with Texas Government Code §2157.068.
Attached Terms and Conditions apply to this Purchase Order.

Vendor Contact:
SHI Government Solutions
Gregory Gonedes
(800) 870-6079
Texas@shi.com
Gregory_Gonedes@shi.com

Agency Contact:
Teressa Harris
(737) 280-6067
Teressa.Harris@hhs.texas.gov

DELIVERY INFO:
ATTN: Rishi Sawhney
(737) 230-6222

Purchaser:
Sheana Prince, CTCD
(512) 406-2548
Sheana.Prince@hhs.texas.gov

Invoicing and Payment: The invoice shall contain all the following 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.

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000312411
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 03/17/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 2
			Ship To: 2053 - Austin:8317 Cross Park Dr HEALTH & HUMAN SERVICES COMMISSION 8317 Cross Park Dr PO Box 149347 350 Austin TX 78754 United States

Vendor: 1223695478 5
SHI GOVERNMENT SOLUTIONS INC
STE 375
1301 S MO PAC EXPY
AUSTIN TX 787466916
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: Prince,Sheana Denea 512/406-2548

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

Deliver to SHIP TO ADDRESS ON PO Please include PO NUMBERS ON PACKING SLIPS, CARTONS, PACKAGES, BUNDLES, ETC.

Freight Terms are FOB Destination Prepaid and Allowed/Add.

Delivery Hours: 8:00-11:30 AM and 1:00-4:30 PM Monday thru Friday except designated State Holidays when the Warehouse is closed

1-1	JLab Audio Go Air POP True wireless earphones with mic in-ear Bluetooth black JLab Audio Part#: EBGAIRPOPRBLK124 Contract Name: Open Market Contract #: Open Market	204-68	1.00	EA	23.00000	\$23.00	04/03/2023
-----	--	--------	------	----	----------	---------	------------

Schedule Total \$23.00

Item Total for Line 1 \$23.00

Total PO Amount \$23.00

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.

Authorized By

Sheana Prince, CTCO

03/20/2023