Department of State Health Services

Purchase Order

Dispatch via Print

Payment Te	rms Freight Terms	Ship Via		11110001/ 1 0000010000		
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-4-0000312503		
	by informal bid, Invitation for Offer, or		Date	Revision Page		
	s, terms, and conditions set forth in the ac		09/01/23	1		
guarantees go requirements All shipmen	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.			6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States		
Vendor:	1930876968 6 COLEJENN INC DBA CENTRATEL 141 NW GREENWOOD AVE STE 200 BEND OR 977031974 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		

Quantity

Purchaser:

UOM

FY24 funding SP/E Requisition 223721 - Pricing per Quote Email from vendor confirming rate dated 03/16/2023 PO Service Dates 09/01/2023 to 08/31/2024

Class/Item

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 08/31/2024 are automatically canceled.

Vendor contact Centratel Teresa Abbas 541-383-8383 800-639-1818 teresaa@centratel.com

Pricing is subject to change.

Line-Sch

Agency contact Gem Naivar 737-218-7071 Gem.Naivar@dshs.texas.gov

PCS contact Nicole Mejia, CTCD, CTCM 512-406-2650 nicole.mejia@hhs.texas.gov

1-1 915-05 1.00 YR 3800.00000 \$3,800.00 09/01/2023
Answering Service for 24 Hour Emergency Phone Line.

 Schedule Total
 \$3,800.00

 Item Total for Line 1
 \$3,800.00

Mejia, Nicole

Extended Amt

Due Date

PO Price

Total PO Amount \$3,800.00

Department of State Health Services

Purchase Order

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Payment To Net 30	erms Freight Terms Prepaid & Allow	Ship V BEST		Purchase Order		HHSTX-4-00	00312503
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 09/01/23	Revision		Page 2
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Vendor:	1930876968 6 COLEJENN INC DBA CENTRATEL 141 NW GREENWOOD AVE STE 2 BEND OR 977031974 United States	200		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERV 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States		SERVICES
				Fax: 512/458-7442 Email: invoices@dshs.texas.gov		exas.gov	
				Purchaser:	Mejia,Nicole		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date

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 Niale Mejar, CTCD, CTCM

03/20/2023