Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Te Net 30	erms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX	-3-0000312507
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 03/20/23	Revision	Page 1
			Ship To:	C732 - Austin:701 W 51st St HEALTH & HUMAN SERVICES COMMISSION 701 W 51st St PO Box 149030 Austin TX 78751 United States	
Vendor:	1223695478 5 SHI GOVERNMENT SOLUTIONS STE 375 1301 S MO PAC EXPY AUSTIN TX 787466916 United States	INC	Bill To:	Invoice-HHSC MC2065 HEALTH & HUMAN SERVIC 4601 W Guadalupe St Austin TX 78751 United States	CES COMMISSION
			Fax: Email:	512/206-4854 IT_invoicing@hhs.texas.gov	
Line Cab	Lungdon Iden ID Line Description		Purchaser:	Arriaga,Samantha Danielle	l Aura Dura Data
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extended	d Amt Due Date

FY23 Purchase

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Procurement Type: IT/I Requisition: 0000219440 PO Service Dates: 06/30/2023 - 06/29/2024

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 06/29/2024 are automatically canceled.

Purchase order issued in accordance with Texas Government Code §2157.068

Contract: DIR-TSO-4288

Quote: 23056731

Agency Contact: Name: Celia Lagunas Phone: (512) 438-2457 Email: Celia.Lagunas01@hhs.texas.gov

Secondary Agency Contact: Name: Kevin Reichert Phone: (512) 438-5354 Email: Kevin.Reichert@hhs.texas.gov

Purchaser Information: Name: Samantha Arriaga Email: Samantha.Arriaga@hhs.texas.gov

Vendor: SHI Government Solutions, Inc Vendor Contact: Gregory Gonedes Vendor Phone: (800) 870-6079 Email: gregory_gonedes@shi.com

Health and Human Services Commission

Purchase Order

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	Prepaid & Allow by informal bid, Invitation for Offer, or F	Request for Propos		Date	se Order Revision	HHSTX-3-0	00031250 Pag	
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.				03/20/2: Ship To	C732 - At HEALTH 701 W 51s PO Box 14 Austin TX	C732 - Austin:701 W 51st St HEALTH & HUMAN SERVICES COMMISSION 701 W 51st St PO Box 149030 Austin TX 78751 United States		
Vendor:	1223695478 5 SHI GOVERNMENT SOLUTIONS INC STE 375 1301 S MO PAC EXPY AUSTIN TX 787466916 United States			Bill To:	HEALTH 4601 W G Austin TX	Invoice-HHSC MC2065 HEALTH & HUMAN SERVICES COMMI 4601 W Guadalupe St Austin TX 78751 United States		
				Fax Em		854 ng@hhs.texas.gov		
				Purchas	er: Arriaga,S	amantha Danielle		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
1-1	TABLEAU - 8 CORE BASE (SERVER TABLEAU SOFTWARE PART#: TS-00191 CONTRACT NAME: PRODUCTS AND RELATED SERVICES (CARAHSOFT) COVERAGE TERM: 6/30/2023 - 6/29/2024	920-04 2)	1.00	EA	173695.44000	\$173,695.44	03/20/2023	
					Schedule Total	\$173,695.44		
				I	tem Total for Line 1	\$173,695.44		
2-1	TABLEAU - PROFESSIONAL (LP) TABLEAU SOFTWARE PART#: TS-00337 CONTRACT NAME: PRODUCTS AND RELATED SERVICES (CARAHSOFT) COVERAGE TERM: 6/30/2023 - 6/29/2024	920-07	10.00	ΕΑ	833.70000	\$8,337.00	03/20/2023	
					Schedule Total	\$8,337.00		
				I	tem Total for Line 2	\$8,337.00		

Health and Human Services Commission

Purchase Order

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Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-0	000312507
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			Ship To:	C732 - Austin:701 W 51st St HEALTH & HUMAN SERVICES COMMISS 701 W 51st St PO Box 149030 Austin TX 78751 United States	
5 5 1 2	223695478 5 SHI GOVERNMENT SOLUTIONS IN STE 375 I301 S MO PAC EXPY AUSTIN TX 787466916 United States	с	Bill To:	Invoice-HHSC MC2065 HEALTH & HUMAN SERVICES C 4601 W Guadalupe St Austin TX 78751 United States	COMMISSION
			Fax: Email:	512/206-4854 IT_invoicing@hhs.texas.gov	
			Purchaser:	Arriaga,Samantha Danielle	
Line-Sch Inv	entory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extended Am	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	
Samantha arriago, CTCD, CTCM	03/20/2023