Department of State Health Services

Purchase Order

Dispatch via Print

Payment Ter Net 30	ms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-	3-0000312545
If advertised by specifications	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			Revision	Page 1
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.		Ship To: 5716 - San Antonio:7430 Louis Past DEPARTMENT OF STATE HEALTH SERVICES 7430 Louis Pasteur Dr San Antonio TX 78229 United States			
Vendor:	Vendor: 1862161688 9 ODP BUSINESS SOLUTIONS LLC PO BOX 660113 DALLAS TX 75266-0113 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	

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

FY23 Purchase

Procurement Type: SP/E Requisition #: 0000219651

INVOICING - See above for Bill to Information

See above for SHIP TO ADDRESS ON PO

AGENCY CONTACT:

Name: Melissa Jimenez / 210-949-2085 Email: Melissa.Jimenez@dshs.texas.gov

HHSC terms and conditions attached

Purchaser Information: Name: Leslie Alexander Phone #: 512-406-2424

Email Address: Leslie.Alexander@hhs.texas.gov

Vendor Information: VID: 18621616889

Contractor: ODP Business Solutions, LLC

Contact Name: Richard Merten

Email: richard.merten@odpbusiness.com

Phone: (832) 477-6118

Alternate Contact Name: Lori Pickering

Freight terms are FOB Destination Prepaid and Allowed

Terms: Net 30

1-1 605-30 4.00 EA 113.69000 \$454.76 03/29/2023

Item #: 7573269 - DYMO® LabelWriter 550 Series Label Printer, Only Works with Authentic Dymo Labels

 Schedule Total
 \$454.76

 Item Total for Line 1
 \$454.76

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			Ship 10:	5716 - San Antonio:7430 Louis Past DEPARTMENT OF STATE HEALTH SERVICES 7430 Louis Pasteur Dr San Antonio TX 78229 United States	
Vendor:	1862161688 9 ODP BUSINESS SOLUTIONS LLC PO BOX 660113 DALLAS TX 75266-0113 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:	Alexander,Leslie L	512/406-2424

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

Lastin Hant S, CTP

03/27/2023