Health and Human Services Commission

Purchase Order

Dispatch via Print

| Payment Terms | | Ship Via | | | | | ~~~~ | |
|---|--|--|---|--|--|---|---|--|
| Net 30 | Prepaid & Allow | BEST WAY | Z Pure | chase Order | | HHSTX-3-0 | | |
| | nformal bid, Invitation for Offer, or Re | | Date | | Revision | | Pag | |
| | rms, and conditions set forth in the adv | | | 1/23 | | | | |
| | onses become a part of this numbered p or services delivered meet or exceed n | | | To: | | 301 N Lamar Blvd | | |
| requirements. | of services derivered meet of exceed in | lumbered purchase ord | ei | | | MAN SERVICES C | OMMISSION | |
| | hinning papers, invoices, and correst | ondence must be ider | ntified | | 4301 N Lamar B | | | |
| All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number. | | | | | Austin TX 78751 United States | | | |
| | | | | | United States | | | |
| BU 300 CE | 53718834 8 | | Bill | То: | Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION | | | |
| | BULLCHASE INC | | | | | | | |
| | 3000 POLAR LN STE 703 | AR PARK TX 786133025 | | | 4001 Highway 36 South Brenham TX 77833 | | | |
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| | United States | | | | United States | | | |
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| | | | | | | | | |
| | | | | Fax: | 979/277-1865 | | | |
| | | | | Email: | 712Accounting@ | hhs.texas.gov | | |
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| | | | | | | | | |
| | | | Purc | chaser: | Connell,Ron Le | e | | |
| Line-Sch In | ventory Item ID - Line Description | Class/Item Qu | antity UOM | | PO Price | Extended Amt | Due Date | |
| | | | | | | | | |
| CP/X Requisition #: H Requester: Gat Phone #: 512-4 | IHSTX-3-0000219056 priele Dangerfield 19-2663 | | | | | | | |
| Requester: Gat Phone #: 512-4 Email: Gabriele SHIP TO ATTN Purchaser Nam Phone #: 512-4 | IHSTX-3-0000219056 oriele Dangerfield 19-2663 .Dangerfield@hhs.texas.gov : Gabriele Dangerfield, 512-419-26 ne: Ron Connell | 63, Gabriele.Dangerf | field@hhs.texas | gov | | | | |
| CP/X Requisition #: H Requester: Gab Phone #: 512-4 Email: Gabriele SHIP TO ATTN Purchaser Nam Phone #: 512-4 Email: ron.con | IHSTX-3-0000219056 priele Dangerfield 19-2663 .Dangerfield@hhs.texas.gov : Gabriele Dangerfield, 512-419-26 le: Ron Connell 406-2666 nell@hhs.texas.gov | 63, Gabriele.Dangerf | field@hhs.texas | gov | | | | |
| CP/X Requisition #: H Requester: Gat Phone #: 512-4 Email: Gabriele SHIP TO ATTN Purchaser Nam Phone #: 512-4 Email: ron.coni Vendor Name: I Contact: Julie I | IHSTX-3-0000219056 priele Dangerfield 19-2663 .Dangerfield@hhs.texas.gov : Gabriele Dangerfield, 512-419-26 te: Ron Connell 106-2666 nell@hhs.texas.gov BULLCHASE _ukenbill / Kyra Alexander | 63, Gabriele.Dangerf | field@hhs.texas | gov | | | | |
| CP/X Requisition #: H Requester: Gat Phone #: 512-4 Email: Gabriele SHIP TO ATTN Purchaser Nam Phone #: 512-4 Email: ron.coni Vendor Name: Contact: Julie I Phone #: 888-5 | IHSTX-3-0000219056 priele Dangerfield 19-2663 .Dangerfield@hhs.texas.gov : Gabriele Dangerfield, 512-419-26 le: Ron Connell 406-2666 nell@hhs.texas.gov BULLCHASE _ukenbill / Kyra Alexander 58-2855 | | field@hhs.texas | gov | | | | |
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| CP/X Requisition #: H Requester: Gab Phone #: 512-4 Email: Gabriele SHIP TO ATTN Purchaser Nam Phone #: 512-4 Email: ron.con Vendor Name: I Contact: Julie I Phone #: 888-5 Email: service(Goods and/or s | IHSTX-3-0000219056 priele Dangerfield 19-2663 .Dangerfield@hhs.texas.gov : Gabriele Dangerfield, 512-419-26 e: Ron Connell 406-2666 hell@hhs.texas.gov BULLCHASE _ukenbill / Kyra Alexander 58-2855 @bullchase.com / kyra@bullchase.o ervices are to be delivered and invo | com biced after Septembe | er 1, 2022. | - | | | | |
| CP/X Requisition #: H Requester: Gat Phone #: 512-4 Email: Gabriele SHIP TO ATTN Purchaser Nam Phone #: 512-4 Email: ron.coni Vendor Name: I Contact: Julie I Phone #: 888-5 Email: service@ Goods and/or s This purchase of the cancelled at | IHSTX-3-0000219056 priele Dangerfield 19-2663 .Dangerfield@hhs.texas.gov : Gabriele Dangerfield, 512-419-26 te: Ron Connell 106-2666 hell@hhs.texas.gov BULLCHASE Lukenbill / Kyra Alexander 58-2855 @bullchase.com / kyra@bullchase.o ervices are to be delivered and invo proter is contingent upon the continu any time in whole or part without po | com biced after Septembe ed availability of lawl enalty. | er 1, 2022. ful appropriation | s by the Texa | • | 'A Procurement Ma | nual, and may | |
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| CP/X Requisition #: H Requester: Gab Phone #: 512-4 Email: Gabriele SHIP TO ATTN Purchaser Nam Phone #: 512-4 Email: ron.com /endor Name: 1 Contact: Julie I Phone #: 888-5 Email: service Goods and/or s Chis purchase of the cancelled at | IHSTX-3-0000219056 priele Dangerfield 19-2663 .Dangerfield@hhs.texas.gov : Gabriele Dangerfield, 512-419-26 e: Ron Connell 406-2666 hell@hhs.texas.gov BULLCHASE _ukenbill / Kyra Alexander 58-2855 @bullchase.com / kyra@bullchase.com ervices are to be delivered and invoce prder is contingent upon the continue any time in whole or part without per ayment: The invoice shall contain and a date, and the total invoice amount ADDRESS ON PO. Payment terms | com biced after Septembe ed availability of law enalty. Il the following in ord . Each invoice shall a are net thirty days (3 | er 1, 2022. ful appropriation ler to be conside also have an atta 30) unless a disc | s by the Texas red for payme ached copy of count has been | ent: PO number r the bill in order t n offered. Facility | referenced, a uniqu to be paid. Mail all c | e invoice original invoices | |
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| CP/X Requisition #: H Requester: Gat Phone #: 512-4 Email: Gabriele SHIP TO ATTN Purchaser Name Phone #: 512-4 Email: ron.com /endor Name: 1 Contact: Julie I Phone #: 888-5 Email: service(Goods and/or s This purchase of the BILL TO rendor to proper rendor to proper (1-1) | IHSTX-3-0000219056 priele Dangerfield 19-2663 .Dangerfield@hhs.texas.gov : Gabriele Dangerfield, 512-419-26 the: Ron Connell 106-2666 hell@hhs.texas.gov BULLCHASE Lukenbill / Kyra Alexander 58-2855 @bullchase.com / kyra@bullchase.com ervices are to be delivered and invoce profer is contingent upon the continue any time in whole or part without per ayment: The invoice shall contain and the date, and the total invoice amount ADDRESS ON PO. Payment terms pring invoice which may delay payment the state of the state of | com biced after Septembe end availability of law enalty. Il the following in ord . Each invoice shall a are net thirty days (3 nt processing. | er 1, 2022. ful appropriation ler to be conside also have an atta 30) unless a disc | s by the Texas red for payme ached copy of count has been | ent: PO number r the bill in order t n offered. Facility | referenced, a uniqu to be paid. Mail all o y is not responsible | e invoice original invoices for failure by th | |
| CP/X Requisition #: H Requester: Gat Phone #: 512-4 Email: Gabriele SHIP TO ATTN Purchaser Name Phone #: 512-4 Email: ron.com /endor Name: 1 Contact: Julie I Phone #: 888-5 Email: service(Goods and/or s This purchase of the BILL TO rendor to proper rendor to proper (1-1) | IHSTX-3-0000219056 priele Dangerfield 19-2663 .Dangerfield@hhs.texas.gov : Gabriele Dangerfield, 512-419-26 e: Ron Connell 406-2666 hell@hhs.texas.gov BULLCHASE _ukenbill / Kyra Alexander 58-2855 @bullchase.com / kyra@bullchase.com ervices are to be delivered and invoce proter is contingent upon the continuanty time in whole or part without pri- ayment: The invoice shall contain a e date, and the total invoice amount ADDRESS ON PO. Payment terms rily invoice which may delay payme | com biced after Septembe end availability of law enalty. Il the following in ord . Each invoice shall a are net thirty days (3 nt processing. | er 1, 2022. ful appropriation ler to be conside also have an atta 30) unless a disc | s by the Texas red for payme ached copy of count has been | ent: PO number r the bill in order t n offered. Facility | referenced, a uniqu to be paid. Mail all o y is not responsible | e invoice original invoices for failure by th | |
| CP/X Requisition #: H Requester: Gab Phone #: 512-4 Email: Gabriele SHIP TO ATTN Purchaser Nam Phone #: 512-4 Email: ron.com Vendor Name: I Contact: Julie I Phone #: 888-5 Email: service Goods and/or s This purchase of the purchase of the BILL TO vendor to prope | IHSTX-3-0000219056 priele Dangerfield 19-2663 .Dangerfield@hhs.texas.gov : Gabriele Dangerfield, 512-419-26 the: Ron Connell 106-2666 hell@hhs.texas.gov BULLCHASE Lukenbill / Kyra Alexander 58-2855 @bullchase.com / kyra@bullchase.com ervices are to be delivered and invoce profer is contingent upon the continue any time in whole or part without per ayment: The invoice shall contain and the date, and the total invoice amount ADDRESS ON PO. Payment terms pring invoice which may delay payment the state of the state of | com biced after Septembe ed availability of law enalty. Il the following in ord . Each invoice shall a are net thirty days (3 nt processing. | er 1, 2022. ful appropriation ler to be conside also have an atta 30) unless a disc | s by the Texa red for payme ached copy of count has bee | ent: PO number r the bill in order t n offered. Facility | referenced, a uniqu to be paid. Mail all d y is not responsible \$122.64 | e invoice original invoices for failure by th | |

Health and Human Services Commission

Purchase Order

| | | - | | | | Dispat | ch via Print |
|--|---|-----------------------|----------|------------------|--|-----------------|------------------|
| Payment Ter Net 30 | Prepaid & Allow | Ship V BEST | WAY | Purchase Order | | HHSTX-3-00 | |
| specifications | by informal bid, Invitation for Offer, or Rec s, terms, and conditions set forth in the adve | rtisement and ve | endor's | Date 03/21/23 | Revision | | Page 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 with our Purchase Order Number. | | | | Ship To: | To: 4551 - Austin:4301 N Lamar Blvd HEALTH & HUMAN SERVICES CO 4301 N Lamar Blvd Austin TX 78751 United States | | |
| Vendor: | 1263718834 8 BULLCHASE INC 3000 POLAR LN STE 703 CEDAR PARK TX 786133025 United States | | | Bill To: | Invoice - DADS HEALTH & HUMAN SERVICES COMMISS 4001 Highway 36 South Brenham TX 77833 United States | | MMISSION |
| | | | | Fax: Email: | 979/277-1865 712Accountin | g@hhs.texas.gov | |
| | | | | Purchaser: | Connell,Ron | Lee | |
| Line-Sch | Inventory Item ID - Line Description | Class/Item | Quantity | UOM | PO Price | Extended Amt | Due Date |
| | | | | Item Total | for Line 1 | \$122.64 | |
| 2-1 | #13U655, Modular Plug, Clear, 8 Contacts, 8 Positions, RJ45, Networking. 100 pack, Mfg.# 7267 | 285-95 | 1.00 | PKG | 9.80000 | \$9.80 | 03/28/2023 |
| | | | | Sche | dule Total | \$9.80 | |
| | | | | Item Total | for Line 2 | \$9.80 | |
| | | | | Total P | O Amount | \$132.44 | |

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 | |
|---------------|------------|
| Reef. | 03/21/2023 |