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-3-0000312631	
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 03/21/23	Revision	Page 1	
			Ship To:	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION		
				1111 W North Loop Austin TX 78756 United States		
X 7 1 100	2205470.5		D'II T	I:- HIIGG A		

Vendor: 1223695478 5

SHI GOVERNMENT SOLUTIONS INC

3828 PECANA TRL

USA

AUSTIN TX 78749-3559

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: Josey,Lauren

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

FY23 Funding

SHIP TO ATTN: Tracie Balandran; (512) 424-6887

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

FREIGHT: F.O.B. Destination Freight Prepaid and Allowed

DELIVERY: 7 Days After Receipt of PO

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday Friday except designated State Holidays

AGENCY CONTACT: Tracie Balandran (512) 424-6887 tracie.balandran@hhs.texas.gov

HHSC BUYER: Lauren Josey CTCD, CTCM 512-406-2599 Lauren.Josey@hhs.texas.gov

VENDOR: SHI Government Solutions Gregory Brown 512-814-4125 Gregory_Brown@shi.com

DIR CONTRACT # DIR-TSO-3763

PURCHASING METHOD: IT/I (DIR Contract)

REQUIREMENTS/LIMITATIONS:

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding.

Invoice per 34 TAC §20.487, amended effective May 1, 2022

Requisition 0000220381

Health and Human Services Commission

Purchase Order

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Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	TX-3-0000312631
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 03/21/23	Revision	Page 2
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Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

United States

				Purcl	haser: Josey,Lauren		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
1-1	FY 2023 Dell Auto/ Air Adaptor 90W	204-64	2.00	EA	55.20000	\$110.40	03/21/2023
					Schedule Total	\$110.40	
MFG ID: 0000000027	MFG Item ID:						
					Item Total for Line 1	\$110.40	
2-1	Dell Power Bank Plus External	207-10	2.00	EA	103.20000	\$206.40	03/21/2023
					Schedule Total	\$206.40	
					Item Total for Line 2	\$206.40	
					Total PO Amount	\$316.80	

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.

AUSTIN TX 78749-3559

United States

Authorized By	
Lawren Josey CTCD, OTCM	03/21/2023