Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	TX-3-0000312696	
specifications, terms	rmal bid, Invitation for Offer, or s, and conditions set forth in the a	dvertisement and vendor's	Date 03/22/23	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.			Ship To:	To: 1837 - Houston: 3 Northpoint Dr HEALTH & HUMAN SERVICES COMMISSION 3 Northpoint Dr		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.						

Vendor: 1470902871 7

BEEPSMART COMMUNICATIONS INC DBA SMARTGROUP SYSTEMS 990 N BOWSER RD STE 720 RICHARDSON TX 750812859

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: Connell,Ron Lee

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

FY23 General Goods

Term Contract: 615-A1 CP/A

Requisition #: HHSTX-3-0000216612 Texas Smart Buy PO - 23121667

Requester: Tracy Rodriguez Phone #: +1 (512) 438-3676

Email: Tracy.Rodriguez@hhs.texas.gov

SHIP TO ATTN: Lisa Vallejo, 713-767-3362, Lisa.Vallejo@hhs.texas.gov

5425 Polk Street Suite J Houston, TX 77023

Purchaser Name: Ron Connell Phone #: 512-406-2666 Email: ron.connell@hhs.texas.gov

Vendor Name: Beepsmart Communications Inc. DBA Smart Group Systems

Contact: Mickey Faruque Phone #: (972) 235-2161 Email: mickey@smgsystems.net

Goods and/or services are to be delivered and invoiced after September 1, 2022.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature CPA Procurement Manual, and may be cancelled at any time in whole or part without penalty.

Invoicing and Payment: The invoice shall contain all the following in order to be considered for payment: PO number referenced, a unique invoice number, invoice date, and the total invoice amount. Each invoice shall also have an attached copy of the bill in order to be paid. Mail all original invoices to the BILL TO ADDRESS ON PO. Payment terms are net thirty days (30) unless a discount has been offered. Facility is not responsible for failure by the vendor to properly invoice which may delay payment processing.

1-1 207-72 15.00 EA 12.86000 \$192.90 03/27/2023

Health and Human Services Commission

Purchase Order

Dispatch via Print

						Dispa	tch via Print
Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship V BEST		Purchase Order		HHSTX-3-00	000312696
specifications, term	formal bid, Invitation for Offer, or Re as, and conditions set forth in the adverse	ertisement and vo	endor's	Date 03/22/23	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:	1837 - Houston:3 Northpoint Dr HEALTH & HUMAN SERVICES COMMISSION 3 Northpoint Dr Ste 118 Houston TX 77060 United States		
B D 99 R	Vendor: 1470902871 7 BEEPSMART COMMUNICATIONS INC DBA SMARTGROUP SYSTEMS 990 N BOWSER RD STE 720 RICHARDSON TX 750812859 United States		Bill To:	Invoice-HHSC Accounting HEALTH & HUMAN SERVICES COMMISSION 4601 W Guadalupe St Austin TX 78751 United States			
				Fax: Email:	512/424-6901 HHSC_AP@hhsc.	.state.tx.us	
Y	A TO II D	CI TI	0	Purchaser:	Connell,Ron Lee		D. D.
Line-Sch Inve	ntory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date

				I ui C	nascr. Commentation		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
					Schedule Total	\$192.90	
					Item Total for Line 1	\$192.90	
					Total PO Amount	\$192.90	

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.

03/22/2023