Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-	0000312781		
specifications, terms	rmal bid, Invitation for Offer, or la, and conditions set forth in the ad	dvertisement and vendor's	Date 03/22/23	Revision Pag			
guarantees goods or requirements.	es become a part of this numbered services delivered meet or exceed ping papers, invoices, and corre Order Number.	numbered purchase order	Ship To:	1905 - Arlington:1301 S Bowen Rd HEALTH & HUMAN SERVICES COMMISSION 1301 S Bowen Rd Ste 200 Arlington TX 76013 United States			
Vendor: 126	54131286.8		Rill To:	Invoice-DSHS Fiscal Claims			

VICTORY PROMOTIONAL PRODUCTS LLC

STE 212 PMB 421 4500 WILLIAMS DR

GEORGETOWN TX 78633-1332

United States

DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

Fax: 512/458-7442

Email: invoices@dshs.texas.gov

Purchaser: Alexander, Leslie L 512/406-2424 **UOM** Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity PO Price Extended Amt Due Date

FY23 Purchase

Procurement Type: SP/E

Requisition #: 0000221838

INVOICING - See above for Bill to Information

See above for SHIP TO ADDRESS ON PO

Agency Delivery Contact: Name: Ellen Ellis / 817-264-4686 Email: Ellen.Ellis@dshs.texas.gov

HHSC terms and conditions attached

HHSC Purchasing:

Contact Name: Leslie Alexander Contact Phone: 512-406-2424

Fax: 512-406-2695

Email: Leslie.Alexander@hhs.texas.gov

VENDOR INFORMATION: Vendor ID# 1264131286

Victory Designs Promotional Products

Contact: Melinda Fox Phone: 512-619-9409

Email: mfox@victorydesignstx.com

Quote/Estimate #: 3831 / Date: 03/01/2023

Freight Terms are FOB Destination Prepaid and Allowed/Add

Terms: Net 30

1-1 037-52 1500.00 EA .84000 \$1,260.00 04/03/2023

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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 03/22/23	Revision Pag			
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with our Purchase (Ste 200 Arlington TX 76013 United States			

Vendor: 1264131286 8

VICTORY PROMOTIONAL PRODUCTS LLC

STE 212 PMB 421 4500 WILLIAMS DR

GEORGETOWN TX 78633-1332

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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: 512/458-7442

Email: invoices@dshs.texas.gov

				Purch	aser: Alexander,Lesli			
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
					Schedule Total	\$1,260.00		
					Item Total for Line 1	\$1,260.00		
2-1	Setup fee for 21CD1216	963-39	1.00	EA	65.00000	\$65.00	04/03/2023	
					Schedule Total	\$65.00		
					Item Total for Line 2	\$65.00		
3-1	Shipping for 21CD1216	962-86	1.00	EA	90.45000	\$90.45	04/03/2023	
					Schedule Total	\$90.45		
					Item Total for Line 3	\$90.45		
4-1	19FS914 Diecut Handle bag white with black imprint 9 1/2"x14", item #19FS914	037-52	500.00	EA	.76000	\$380.00	04/03/2023	
					Schedule Total	\$380.00		
					Item Total for Line 4	\$380.00		
5-1	Setup for 19FS914	963-39	1.00	EA	65.00000	\$65.00	04/03/2023	
					Schedule Total	\$65.00		
					Item Total for Line 5	\$65.00		
6-1	Shipping for 19FS914	962-86	1.00	EA	23.24000	\$23.24	04/03/2023	
					Schedule Total	\$23.24		
					Item Total for Line 6	\$23.24		

Department of State Health Services

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Payment T	erms Freight Terms	Ship Via			•	cii via i iiii	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-3-0000312781			
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Vendor:	Vendor: 1264131286 8 VICTORY PROMOTIONAL PRODUCTS LLC STE 212 PMB 421 4500 WILLIAMS DR GEORGETOWN TX 78633-1332 United States		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICE 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States		I SERVICES	
			Fax: Email:	512/458-7442 invoices@dshs.texas	s.gov		
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	Purchaser: UOM	Alexander,Leslie L	51 Extended Amt	2/406-2424 Due Date	
Line-Scii	Inventory term in - Line Description	Class/Itchi Qualitity				Duc Date	
Total PO Amount \$1,883.69							

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 Si CTP

03/22/2023