## **Health and Human Services Commission**

#### **Purchase Order**

**Dispatch via Print** 

Payment Te Net 30	rms Freight Terms FOB Dest. Prepaid & Allowed	-	hase Order	HHSTX-3-0000312832
specification	FOB Dest. Prepaid & Allowed BEST WAY d by informal bid, Invitation for Offer, or Request for Proposal; all ns, terms, and conditions set forth in the advertisement and vendor's responses become a part of this numbered purchase order. Contractor goods or services delivered meet or exceed numbered purchase order ts.  nts, shipping papers, invoices, and correspondence must be identi	rtisement and vendor's 03/23		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.  All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.		mbered purchase order	Ship To: 1199 - Edinburg:2412 E Richardson HEALTH & HUMAN SERVICES COM 2412 E Richardson St Edinburg TX 78539 United States	
Vendor:	SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117	Bill T	`o:	Invoice-HHSC-Adult Protective HEALTH & HUMAN SERVICES COMMISSION 2520 S Veterans Blvd PO Box 960 Edinburg TX 78539 United States
			Fax: Email:	956/316-8355 reg11purchases@hhsc.state.tx.us
		Purcl	haser:	Fletcher,Patricia Rose

Quantity

**UOM** 

PO Price

Extended Amt

**Due Date** 

Agency Contact: Arlena Salazar

Phone: 956/614-7111

Line-Sch

EMAIL: arlena.salazar@hhs.texas.gov

HHSC PCS CONTACT: Patricia Fletcher

Phone: 512-406-2538

EMAIL: Patricia.Fletcher@hhsc.state.tx.us

VENDOR: South Central Supply

Name Hope Craft Tel # 512/367-0311

Email: sales@supplytexas.com

Please find a copy of our standard terms and conditions attached.

**Inventory Item ID - Line Description** 

Please confirm receipt of this purchase order.

#### NOTE: FREIGHT TERMS ARE FOB DESTINATION PREPAY AND ALLOW

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

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

Class/Item

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

1-1	Business Cards, Laser, White, (2" X 3 1/2") 250 Pack, Supplier Part #AVE5371	645-31	150.00	PKG	9.99000	\$1,498.50	03/23/2023
					Schedule Total	\$1,498.50	
					Item Total for Line 1	\$1,498.50	
2-1	Card Stock (65 lb), Orange, 250/pack (8.5"x11"), Supplier Part #WAU22761	645-31	10.00	PKG	15.28000	\$152.80	03/23/2023
					Schedule Total	\$152.80	
					Item Total for Line 2	\$152.80	

# **Health and Human Services Commission**

# **Purchase Order**

**Dispatch via Print** 

Payment Terms Net 30	Freight Terms FOB Dest. Prepaid & Allowed	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-3-00003128	32
specifications, terms	rmal bid, Invitation for Offer, or Request, and conditions set forth in the advertise	ment and vendor's	<b>Date</b> 03/23/23	Revision P	Page 2
	es become a part of this numbered purcha services delivered meet or exceed number		Ship To:	1199 - Edinburg:2412 E Richardson HEALTH & HUMAN SERVICES COMMISSION 2412 E Richardson St	
All shipments, ship with our Purchase	ping papers, invoices, and correspond Order Number.	ence must be identified		Edinburg TX 78539 United States	
<b>Y</b> 100	20000000			Inneita IIIIGC Adult Durtantina	

**Vendor:** 1900999880 8

SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117

**United States** 

Bill To: Invoice-HHSC-Adult Protective

HEALTH & HUMAN SERVICES COMMISSION

2520 S Veterans Blvd PO Box 960

Edinburg TX 78539 United States

**Fax:** 956/316-8355

Email: reg11purchases@hhsc.state.tx.us

				Puro	chaser: Fletcher,F	atricia Rose	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
3-1	Cleaner, Screen wipes, 24 Pack, Supplier Part #REARR1209	207-25	150.00	BX	6.76000	\$1,014.00	03/23/2023
					Schedule Total	\$1,014.00	
					Item Total for Line 3	\$1,014.00	
4-1	Copyholders, Desktop w/clip, Supplier Part #279252	605-14	50.00	EA	12.71000	\$635.50	03/23/2023
					Schedule Total	\$635.50	
					Item Total for Line 4	\$635.50	
5-1	Correction Pen 24 oz, Supplier Part #7510013861609	615-29	50.00	EA	2.75000	\$137.50	03/23/2023
					Schedule Total	\$137.50	
					Item Total for Line 5	\$137.50	
6-1	Envelopes, 28 lb, Clasp , 10 x 13, 100 per Box, Supplier Part #330888	310-06	100.00	BX	17.41000	\$1,741.00	03/23/2023
					Schedule Total	\$1,741.00	
					Item Total for Line 6	\$1,741.00	
7-1	Markers, Permanent, Jumbo, Round Bullit Tip, 12 per Box Color Black, Supplier Part #100000	785-30	50.00	DZ	9.99000	\$499.50	03/23/2023
					Schedule Total	\$499.50	
					Item Total for Line 7	\$499.50	
8-1		605-46	250.00	EA	1.25000	\$312.50	03/23/2023

## **Health and Human Services Commission**

### **Purchase Order**

Ship Via

**Payment Terms** 

Freight Terms

**Dispatch via Print** 

Net 30	FOB Dest. Prepaid & Allowed	Snip V BEST		Purcha	se Order		HHSTX-3-0		
pecifications	by informal bid, Invitation for Offer, or Rec s, terms, and conditions set forth in the adve	ertisement and ve	endor's	<b>Date</b> 03/23/2		evision		Paç	
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.					HI 24 Ed	1199 - Edinburg:2412 E Richardson HEALTH & HUMAN SERVICES COMMISSION 2412 E Richardson St Edinburg TX 78539 United States			
endor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States			Bill To:	HI 25 PC Ec			OMMISSION	
				Fax: Email:		956/316-8355 reg11purchases@hhsc.state.tx.us			
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	Purchas UOM		etcher,Patric Price	cia Rose Extended Amt	D D (	
anc-sen	Moistener, Sparco 01569 Fingertip, .38 oz, Supplier Part #28296	Class/Item	Quantity	COM	1	, Trice	Datemed Time	Due Date	
					Schedule	Total	\$312.50		
				I	tem Total for	Line 8	\$312.50		
-1	Stamp Ink, Refill Black, 2 oz., Supplier Part #AVE21448	615-77	20.00	EA	3	.63000	\$72.60	03/23/2023	
					Schedule	Total	\$72.60		
				I	tem Total for	Line 9	\$72.60		
0-1	Tabs, Index Dividers, Big, Multi-Color 5-Tab, Buff, Supplier Part #13406	615-39	100.00	EA	1	.69000	\$169.00	03/23/2023	
					Schedule	Total	\$169.00		
				Ite	em Total for L	ine 10	\$169.00		

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

Papiaa Flitches, CTCD, CTCM

03/23/2023