Purchase Order

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Payment Terms Freight Terms Ship Via HHSTX-3-0000312853 Net 30 FOB Dest. Prepaid & Allowed BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Page Date Revision specifications, terms, and conditions set forth in the advertisement and vendor's 03/23/23 1 conforming responses become a part of this numbered purchase order. Contractor Ship To: 1199 - Edinburg:2412 E Richardson guarantees goods or services delivered meet or exceed numbered purchase order HEALTH & HUMAN SERVICES COMMISSION requirements. 2412 E Richardson St All shipments, shipping papers, invoices, and correspondence must be identified Edinburg TX 78539 with our Purchase Order Number. United States Vendor: 1270077967 6 Bill To: Invoice-HHSC-Adult Protective DREAM RANCH LLC HEALTH & HUMAN SERVICES COMMISSION ATTN: SHERI DEWET 2520 S Veterans Blvd 11614 JIM CHRISTAL RD PO Box 960 KRUM TX 762497027 Edinburg TX 78539 **United States** United States Fax: 956/316-8355 reg11purchases@hhsc.state.tx.us Email: Fletcher, Patricia Rose **Purchaser:** UOM Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity PO Price Extended Amt **Due Date** AGENCY CONTACT: Name: Arlena Salazar Phone: 956/614-7111 Email:arlena.salazar@hhs.texas.gov PURCHASER: Name Patricia Fletcher Phone:512/406-2538 Email:patricia.fletcher@hhs.texas.gov VENDOR: Dream Ranch LLC dba Dream Ranch Office Supplies Name: Sheri Dewet Phone: 940/591-6565 Email: sheri@dreamranchtx.com Procurement methods were evaluated, and the best value is provided using the TXMAS contract. Txmas Contract: TxMAS-18-7505 Term: 8/28/2018 - 6/2/2023 no renewals Smartbuy PO: 23121880 **REQUIREMENTS/LIMITATIONS:** This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding. SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO. FREIGHT: F.O.B. Destination Freight prepaid Allowed. Delivery hours are from 8-11:30am and 1-4:30pm M-F Except State Holidays Invoice per 34 TAC §20.487, amended effective May 1, 2022 1-1 493-18 50.00 EA 4.50000 \$225.00 03/23/2023 Air Freshener, Metered Refill 6.6 oz., CLEAN AND FRESH, Supplier Part #TMS1042771EA Schedule Total \$225.00 Item Total for Line 1 \$225.00 2 - 1615-13 20.00 EA 14.63000 \$292.60 03/23/2023 Easel Pads, Self Adhesive, Unruled

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Vendor:	1270077967 6 DREAM RANCH LLC ATTN: SHERI DEWET 11614 JIM CHRISTAL RD KRUM TX 762497027 United States			Bill T	HEA 2520 PO B Edint	Invoice-HHSC-Adult Protective HEALTH & HUMAN SERVICES COMMISSION 2520 S Veterans Blvd PO Box 960 Edinburg TX 78539 United States		
						16-8355 purchases@hł	isc.state.tx.us	
Charles Cale	Income the time Description	<u>Class</u> / I 4	Q			her,Patricia F		Dece Dete
Line-Sch	Inventory Item ID - Line Description 27"x34", 50 Sheets, Supplier Part	Class/Item	Quantity	UOM	PO P	rice	Extended Amt	Due Date
	#7530006198880							
						otal		
					Item Total for Lin	e 2	\$292.60	
-1	Markers, Permanent, Jumbo, Round Bullit Tip, 12 per Box Color Red, Supplier Part #NSN5194374	620-70	50.00	DZ	10.42	000	\$521.00	03/23/2023
					Schedule T	otal	\$521.00	
					Item Total for Lin	e 3	\$521.00	
4-1	Pencil, Mechanical, 0.7mm, 12 pack, Supplier Part #BICMPE11	620-20	100.00	DZ	3.50	000	\$350.00	03/23/2023
					Schedule T	otal	\$350.00	
					Item Total for Lin	e 4	\$350.00	
5-1	Post-It Notes, 1 1/2X2, Assorted colors, 24 Pack, 100 sheets per Pad, Supplier Part #MMM65324APVAD	615-13	150.00	EA	10.49	000	\$1,573.50	03/23/2023
					Schedule T	otal	\$1,573.50	
					Item Total for Lin	e 5	\$1,573.50	
5-1	Post-It Notes, 4X4, Lined, Yellow, 90 Sheets, 6 Pack, Supplier Part #MMM6756SSCY	615-13	150.00	EA	10.11	000	\$1,516.50	03/23/2023
					Schedule T	otal	\$1,516.50	

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Net 30	FOB Dest. Prepaid & Allowed	BEST	WAY	Purchase C		HHSTX-3-0		
specification	by informal bid, Invitation for Offer, or Res, terms, and conditions set forth in the advantage of the set of	ertisement and ve	endor's	Date 03/23/23	Revision		Pag	
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				Ship To:	HEALTH & HU 2412 E Richards	1199 - Edinburg:2412 E Richardson HEALTH & HUMAN SERVICES COMMISSION 2412 E Richardson St Edinburg TX 78539 United States		
with our Purchase Order Number.				United States				
Vendor:	1270077967 6 DREAM RANCH LLC ATTN: SHERI DEWET 11614 JIM CHRISTAL RD KRUM TX 762497027 United States			Bill To:	Invoice-HHSC-A HEALTH & HU 2520 S Veterans PO Box 960 Edinburg TX 785 United States	MAN SERVICES C Blvd	OMMISSION	
				Fax: Email:	956/316-8355 reg11purchases@	hhsc.state.tx.us		
				Purchaser:	Fletcher,Patrici			
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
7-1	Stamp Ink, Refill Red .9 oz, Supplier Part #NSN2073960	203-72	20.00	EA	4.75000	\$95.00	03/23/2023	
					Schedule Total	\$95.00		
				Item	Total for Line 7	\$95.00		
3-1	Stamp Pads, Black, Supplier Part #NSN4316521	615-77	200.00	EA	3.02000	\$604.00	03/23/2023	
					Schedule Total	\$604.00		
				Item	Total for Line 8	\$604.00		
9-1	Tab Protectors, 3 1/2 X 1-11/16, 100 Pack, Supplier Part #SMD67600	615-43	50.00	EA	4.06000	\$203.00	03/23/2023	
					Schedule Total	\$203.00		
				Item	Total for Line 9	\$203.00		
0-1	Tape, Clear, 2" X 360" Strapping tape w/dispenser, Supplier Part #MMM50	610-96	50.00	EA	4.21000	\$210.50	03/23/2023	
					Schedule Total	\$210.50		
				Item T	otal for Line 10	\$210.50		
1-1	Tray, Letter, Rcyc, Black, Officemate, Single, Supplier Part #OIC26052	615-33	50.00	EA	2.81000	\$140.50	03/23/2023	
					Schedule Total	\$140.50		
				Item T	otal for Line 11			
				т	otal PO Amount	\$5,731.60		
				1	otal PO Amount	φ3,/31.0U		

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Payment Te Net 30	erms Freight Terms FOB Dest. Prepaid & Allowed	Ship V BEST V		Purchase Order	HHSTX-3	0000312853
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			Ship To:	1199 - Edinburg:2412 E Richards HEALTH & HUMAN SERVICES 2412 E Richardson St Edinburg TX 78539 United States		
Vendor:	1270077967 6 DREAM RANCH LLC ATTN: SHERI DEWET 11614 JIM CHRISTAL RD KRUM TX 762497027 United States			Bill To:	Invoice-HHSC-Adult Protective HEALTH & HUMAN SERVICES 2520 S Veterans Blvd PO Box 960 Edinburg TX 78539 United States	COMMISSION
				Fax: Email:	956/316-8355 reg11purchases@hhsc.state.tx.us	
				Purchaser:	Fletcher,Patricia Rose	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price Extended A	nt Due Date

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		
Papian Flitcles,	CTCD, CTCM	03/23/2023

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