Department of State Health Services

Purchase Order

Dispatch via Print

Payment Ter Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-0000312926
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 03/23/23	Revision Page
			Ship To:	2631 - Port Lavaca:436 State Highw HEALTH & HUMAN SERVICES COMMISSION 436 State Highway 35 S Port Lavaca TX 77979 United States
Vendor:	1270077967 6 DREAM RANCH LLC ATTN: SHERI DEWET 11614 JIM CHRISTAL RD KRUM TX 762497027 United States		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: Email:	512/458-7442 invoices@dshs.texas.gov

Quantity

Purchaser:

UOM

Alvarado, Veronica

Extended Amt

Due Date

PO Price

FY23 Purchase / Requisition #: 0000221568

Procurement Type: SP/E Not to Exceed \$192.73

Line-Sch

Shipping Instructions: Ship according to the DUE DATES specified on the PO.

Freight: F.O.B Destination Freight Prepaid Allowed

Inventory Item ID - Line Description

Delivery: 10 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

Class/Item

Quote #: 10421

Agency Contact:

George Diaz @ 210-949-2168 george.diaz@dshs.texas.gov

Purchaser:

Veronica Alvarado @ 512-406-2505 Veronica.Alvarado@hhs.texas.gov

Vendor Information: Dream Ranch Sheri De Wet @ 972-668-3190 sheri@dreamranchtx.com

Requirement / Limitations:

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

1-1 450-15 1.00 EA 115.49000 \$115.49 04/07/2023

Quik Shade Expedition 64 Team Colors 10' x 10' Instant Canopy

 Schedule Total
 \$115.49

 Item Total for Line 1
 \$115.49

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* : G.	To the Market of the Control of the	CI TI	0 44	Purchaser:	Alvarado,Vero		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt 1	Due Date
0 1		C10 15	1.00	T 4	47 24000	¢47.04 O	107/0000

				1 111	maser. / mvarado, vo	TOTILOU	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
2-1	Escalade Sports 40 lb Canopy Weights 4-Pack	640-15	1.00	EA	47.24000	\$47.24	04/07/2023
					Schedule Total	\$47.24	
					Item Total for Line 2	\$47.24	
3-1	Shipping	962-86	1.00	LOT	30.00000	\$30.00	04/07/2023
					Schedule Total	\$30.00	
					Item Total for Line 3	\$30.00	
					Total PO Amount	\$192.73	

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	
Veronica Alvarado, CTCV, CTCM	03/24/2023