# **Health and Human Services Commission**

### **Purchase Order**

**Dispatch via Print** 

Payment To Net 30	erms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order		HHSTX-3-0000313047
If advertised specification	d by informal bid, Invitation for Offer, or Rans, terms, and conditions set forth in the adv	equest for Proposal; all vertisement and vendor's	Date 03/24/23	Revision	Page 1
guarantees g requirement All shipmer	responses become a part of this numbered goods or services delivered meet or exceed ts. nts, shipping papers, invoices, and corres urchase Order Number.	numbered purchase orde	r Snip 10:	6484 - Mexia:424 HEALTH & HUM 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States	Mesquite Dr AN SERVICES COMMISSION
Vendor:	1472262776 8 EYEMART EXPRESS LLC DBA EYEMART EXPRESS #20 5201 BOSQUE BLVD STE 230 WACO TX 767104676 <b>United States</b>		Bill To:	Invoice - DADS HEALTH & HUM 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States	AN SERVICES COMMISSION
			Fax: Email:	254/562-1894 718Accounting@h	hs.texas.gov
			Purchaser:	Meads,Courtney	512/406-2478
Line-Sch	Inventory Item ID - Line Description	Class/Item Qu	antity UOM	PO Price	Extended Amt Due Date

Blanket Purchase Order

TERM: March 24,2023, through August 31, 2023

SHIPPING INSTRUCTIONS: DO NOT SHIP until notified by Agency Contact.

FREIGHT: F.O.B. Destination Freight Prepaid Allowed

DELIVERY: 14 Days After Receipt of PO

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday thru Friday except designated State Holidays when the Warehouse is closed.

SEND INVOICES VIA EMAIL TO: 718Accounting@hhs.texas.gov

AGENCY CONTACT: Katrina Erwin katrina.erwin@hhs.texas.gov 254-562-1448

Laura Watson laura.watson@hhs.texas.gov 254.562.1141

HHSC BUYER: Courtney Meads CTCD, CTCM 512-406-2478 courtney.meads@hhs.texas.gov

VENDOR: Vendor: 14722627768 Eyemart Express LLC Waco #20

Anna Brewer 972-277-3045 or 469-999-7965 abrewer@eyemartexpress.com

PURCHASING METHOD: EX-0 Not to Exceed \$ 25000.00

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Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship V BEST		Purchase Order	H	HSTX-3-00	000313047
specifications, ter	informal bid, Invitation for Offer, or Rec rms, and conditions set forth in the adve	rtisement and ve	endor's	<b>Date</b> 03/24/23	Revision		Page 2
guarantees goods requirements. All shipments, shipments	onses become a part of this numbered pu s or services delivered meet or exceed nu- hipping papers, invoices, and corresp ase Order Number.	umbered purchas	e order	Ship To:	6484 - Mexia:424 HEALTH & HUM 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States		DMMISSION
	1472262776 8 EYEMART EXPRESS LLC DBA EYEMART EXPRESS #20 5201 BOSQUE BLVD STE 230 WACO TX 767104676 United States			Bill To:	Invoice - DADS HEALTH & HUM. 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States	AN SERVICES CC	OMMISSION
				Fax: Email:	254/562-1894 718Accounting@hl	ns.texas.gov	
				Purchaser:	Meads,Courtney	51	2/406-2478
Line-Sch Inv	ventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date

Quantities may be increased or decreased upon need during the term of the PO.

The quantities shown are estimates only and do not constitute a guarantee of purchase. Any quantities not ordered and received by August 31, 2023, will be considered cancelled.

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY23 funding.

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

#### Requisition # 222702

(Include for 1 Lot POs) Note: Agency will not order products on this PO that are available from Workquest or Texas Correctional Industries. Agency will not order capital or controlled assets on this PO.

1-1	Eyeglasses for Mexia State Supported Living Center residents.	625-26	1.00	LOT	25000.00000	\$25,000.00	03/24/2023
					Schedule Total	\$25,000.00	
					Item Total for Line 1	\$25,000.00	
					Total PO Amount	\$25,000.00	

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.

# **Health and Human Services Commission**

### **Purchase Order**

**Dispatch via Print Payment Terms** Freight Terms Ship Via HHSTX-3-0000313047 Net 30 Prepaid & Allow BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Revision Date Page specifications, terms, and conditions set forth in the advertisement and vendor's 03/24/23 3 conforming responses become a part of this numbered purchase order. Contractor 6484 - Mexia:424 Mesquite Dr Ship To: guarantees goods or services delivered meet or exceed numbered purchase order HEALTH & HUMAN SERVICES COMMISSION requirements. 424 Mesquite Dr All shipments, shipping papers, invoices, and correspondence must be identified PO Box 1132 with our Purchase Order Number. Mexia TX 76667 United States Vendor: 14722627768 Bill To: Invoice - DADS EYEMART EXPRESS LLC HEALTH & HUMAN SERVICES COMMISSION DBA EYEMART EXPRESS #20 424 Mesquite Dr PO Box 1132 5201 BOSQUE BLVD STE 230 WACO TX 767104676 Mexia TX 76667 United States United States Fax: 254/562-1894 Email: 718Accounting@hhs.texas.gov 512/406-2478 **Purchaser:** Meads,Courtney Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity UOM **PO Price** Extended Amt Due Date

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Cont	1 Carlo		03/24/2023
			<u>03/24/2023</u>