Department of State Health Services

Purchase Order

					Dispatch via Print	
Payment Term Net 30	ns Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHS	TX-4-0000313053	
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 09/01/23	Revision	Page 1	
			Ship To:	6694 - Austin:1111 W No HEALTH & HUMAN SE 1111 W North Loop Austin TX 78756 United States	North Loop SERVICES COMMISSION	
Vendor:	1741530352 2 HASTINGS COMMUNICATION SERVICES PO BOX 1724 AUSTIN TX 787671724 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		
			Purchaser:	Wright,Byron Carl	512/406-2512	
Line-Sch I	nventory Item ID - Line Description Clas	s/Item Quantity	UOM	PO Price Exte	ended Amt Due Date	

FY24 funding

OM/Q

Requisition 221326 - Solicitation 221326 PO Service Dates 09/01/2023 to 08-31-2024 Goods and/or services are to be delivered and invoiced after September 1, 2023

Attached Terms and Conditions apply to this Purchase Order.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2024 are automatically canceled.

Vendor contact

Marija F. Bernota 512-472-1558 BILLING@Hastings.com

Agency contact

Lula Schuler +1 (512) 776-3444 Lula.Schuler@dshs.texas.gov

Facility (if applicable)

PCS contact

Byron Wright CTCD 512-406-2512 Byron.Wright@hhs.texas.gov

1-1

FY24 24 Hour Live Answering Service for DSHS for 6 different regions for the period of 09/01/2023 to 08/31/2024. 915-20

12.00 MOS

1891.00000

Department of State Health Services

Purchase Order

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Vendor:	1741530352 2 HASTINGS COMMUNICATION SEF PO BOX 1724 AUSTIN TX 787671724 United States	RVICES	Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States		
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			Purchaser:	Wright,Byron Ca	arl 51	2/406-2512
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
			Scho	edule Total	\$22,692.00	
			Item Total	for Line 1	\$22,692.00	
		Total P	O Amount	\$22,692.00		

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			
Byra Wright, CTCD,			
	03/24/2023		