Department of State Health Services

Purchase Order

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Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship V i BEST V		Purchase Order	ŀ	HSTX-3-0000313167
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 03/27/23	Revision	Page 1	
			Ship To:	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States		
Vendor:	1272070628 7 AHI ENTERPRISES LLC 16120 COLLEGE OAK STE 105 SAN ANTONIO TX 782494044 United States			Bill To:	Invoice-DSHS Fisc DEPARTMENT OI 1100 W 49th St (RI PO Box 149347 Austin TX 78756 United States	F STATE HEALTH SERVICES
				Fax: Email:	512/458-7442 invoices@dshs.texa	is.gov
				Purchaser:	Rodriguez,Linda	512/406-2533
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt Due Date

FY23 Purchase / Requisition # 219499

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: 9 Days After Receipt of PO

SMARTBUY PO # 23122323

Agency Delivery Contact: Rebecca Waldon @ 512-231-5609 Rebecca.Waldon@hhs.texas.gov

Purchaser Information: Linda Rodriguez @ 512-406-2533 Linda.Rodriguez3@hhs.texas.gov

Vendor Information: AHI Enterprises, LLC Mark Nolan @ (210) 653-7770 mark@ahitexas.com

Purchasing Method: CP-A

Term Contract # 615-A1

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

INCLUDE P.O. NUMBER ON PACKING SLIPS, CARTONS, PACKAGES, BUNDLES, ETC.

1-1		615-43	12.00	BOX	7.24000	\$86.88	04/05/2023
	Commodity Code: 61543131124 - Folder, Hanging, 1/5-Cut Adjustable Tab, Letter, Green, 25/Box, Freight Included						

Schedule Total

\$86.88

Dispatch via Print

Department of State Health Services

Purchase Order

Payment Terms	Freight Terms	Ship Via			Dioput	tch via Print
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	ŀ	HSTX-3-00	<u>003131</u> 67
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AH 161 SA	1272070628 7 AHI ENTERPRISES LLC 16120 COLLEGE OAK STE 105 SAN ANTONIO TX 782494044 United States		Bill To: Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH S 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States		I SERVICES	
			Fax: Email:	512/458-7442 invoices@dshs.texa	IS.gov	
			Purchaser:	Rodriguez,Linda	512	2/406-2533
Line-Sch Inven	tory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
			Item Total for Line 1 \$86.88			
			Total PO Amount \$86.88			

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	
finde Rodriguez, CTCD, CTCM	<u>03/27/2023</u>