

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000313380
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.			Date 03/29/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 2 - 2/20/2024
			Page 1
			Ship To: 4549 - San Antonio:6711 S New Brau HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States

Vendor: 1390380010 3
JOHNSON CONTROLS INC
PO BOX 730068
DALLAS TX 75373
United States

Bill To: Invoice-HHSC Accounting
HEALTH & HUMAN SERVICES COMMISSION
4601 W Guadalupe St
Austin TX 78751
United States

Fax: 512/424-6901
Email: HHSC_AP@hhsc.state.tx.us

Exempt Reason: GPO

Purchaser: Farris,Lilly K 512/406-2452

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
----------	--------------------------------------	------------	----------	-----	----------	--------------	----------

FY23

AP Email Address: hhsc_ap@hhsc.state.tx.us

INVOICING INFORMATION:

Vendor shall electronically submit the Maintenance and Construction invoice packet to:

HHSC Maintenance and Construction assigned Project Manager (ODR):
Roger Brigance, Roger.brigance@hhs.texas.gov

With copy to:

1. HHSC Accounts Payable at HHSC_AP@hhsc.state.tx.us
2. HHSC Maintenance and Construction Invoice team at MC_Invoices@hhsc.state.tx.us
3. If HUB Progress Reports are required, HHSC HUB Office at HUB_PAR@hhsc.state.tx.us

The contractor shall submit invoice packets using the subject line: Invoice - Invoice Amount, Purchase Order #HHSTX-3-0000313380, MC Project 23-011-SAH, Invoice #, Month of service

Requisition #: HHSTX-3-0000222679

DELIVERY: INSTALLATION AT 6711 S New Braunfels San Antonio TX

QUOTE#: HHS-R22 - Exhibit C - San Antonio State Hospital

Refer to RFP-R22 Bid Solicitation on the following Exhibits:
Exhibit A - Infection Control Risk Assessment
Exhibit B - Infection Control Construction Permit

AGENCY DELIVERY CONTACT:

Name: Bobby Bustillos
Facility: San Antonio State Supported Living Center
Phone: 210-531-7432
Email: bobby.bustillos@hhs.texas.gov

PROJECT MANAGER:

Contact: Roger Brigance
Address: 909 W. 45 St. Bldg. 633 Austin TX 78751
Phone: 512-206-4728 Cell: 512-413-2820
Email: roger.brigance@hhs.texas.gov

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000313380
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.			Date 03/29/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 2 - 2/20/2024
			Page 2
			Ship To: 4549 - San Antonio:6711 S New Brau HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States

Vendor: 1390380010 3
JOHNSON CONTROLS INC
PO BOX 730068
DALLAS TX 75373
United States

Bill To: Invoice-HHSC Accounting
HEALTH & HUMAN SERVICES COMMISSION
4601 W Guadalupe St
Austin TX 78751
United States

Fax: 512/424-6901
Email: HHSC_AP@hhsc.state.tx.us

Exempt Reason: GPO

Purchaser: Farris,Lilly K 512/406-2452

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
----------	--------------------------------------	------------	----------	-----	----------	--------------	----------

HHSC PURCHASER/BUYER:
Name: Lilly Farris CTCD
Phone: 512-406-2452
Email: lilly.farris@hhs.texas.gov

VENDOR:
Name: Johnson Controls Inc
Contact: Taylor Foltyn
Phone: 737-218-3865
Email: taylor.foltyn@jci.com

OMNIA GPO and HHS Contract # HHS000840200001

OMNIA GPO and Johnson Controls Inc Contract # R-200402

PURCHASING METHOD: EX-0
Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

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

PURCHASE MADE UNDER THE AUTHORITY OF TEXAS GOVERNMENT CODE 2155.144(b); (b-) FOR CLIENT SERVICES.

This purchase is being issued under TX Gov. Code §2155.144 (b-1), Goods and/or services purchased for the benefit of or on behalf of an agency's clients in order to carry out one or more of an agency's programs.

04-04-23 Change vendor address
Exhibit F Quote for San Antonio State Hospital from Johnson Controls
Exhibit D Equipment List for San Antonio State Hospital
Exhibit E San Antonio State Hospital Rules and Regulations
02-20-24 change end date on from 08-31-23 to 05-31-24 per request from Karen Harmon
Lilly Farris CTCD

1-1	FY23 HVAC Replacements at San Antonio State Hospital #23-011-SAH R-22 HVAC	914-50	1.00	LOT	372313.70000	\$372,313.70	05/31/2024
-----	--	--------	------	-----	--------------	--------------	-------------------

Schedule Total \$372,313.70

Total Contracted amount is \$372,313.70
Contingency Funds of \$33,846.70 for unforeseen condition expense, these funds must be authorized by HHSC staff before use.

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000313380
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.			Date 03/29/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 2 - 2/20/2024
			Page 3
			Ship To: 4549 - San Antonio:6711 S New Brau HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States

Vendor: 1390380010 3
JOHNSON CONTROLS INC
PO BOX 730068
DALLAS TX 75373
United States

Bill To: Invoice-HHSC Accounting
HEALTH & HUMAN SERVICES COMMISSION
4601 W Guadalupe St
Austin TX 78751
United States

Fax: 512/424-6901
Email: HHSC_AP@hhsc.state.tx.us

Exempt Reason: GPO

Purchaser: Farris,Lilly K 512/406-2452

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
----------	--------------------------------------	------------	----------	-----	----------	--------------	----------

Item Total for Line 1 \$372,313.70

Total PO Amount \$372,313.70

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 <i>Lilly Lannia, CTCD</i>	02/20/2024
---	-------------------