Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHS	TX-3-0000313480		
If advertised by info	ormal bid, Invitation for Offer, or I s, and conditions set forth in the ac	Request for Proposal; all dvertisement and vendor's	Date 03/29/23	Revision Page			
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.		Ship To:	4546 - Austin:1100 W 49th St (DBGL DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DBGL) PO Box 149347 Austin TX 78756 United States				
Vendor: 15	81853319 0		Bill To:	Invoice-DSHS Fiscal Clair	ns		

HOME DEPOT USA INC PO BOX 9001043 DEPT 32-2540185182 LOUISVILLE KY 402901043

United States

DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

Fax: 512/458-7442

Email: invoices@dshs.texas.gov

Purchaser: Alexander, Leslie L 512/406-2424 Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity **UOM** PO Price **Extended Amt Due Date**

FY23 Purchase

Procurement Type: EX/0 Requisition #: 0000221593

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

DELIVERY: 3-7 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

**Please send invoice via email: Sindy.Jimenez@dshs.texas.gov

QUOTE #: HG100087614254 FY23 NIGP 460-30,460-04

See above for SHIP TO ADDRESS ON PO

Agency Delivery Contact:

Name: Drew Stolpman / 512-776-6235 Email: Drew.Stolpman@dshs.texas.gov

FOR DSHS INTERNAL DELIVERY INFO:

BUILDING: Laboratory L114 FLOOR: 2nd. RM L216

HHSC terms and conditions attached

Purchaser Information: HHSC Purchasing:

Contact Name: Leslie Alexander Contact Phone: 512-406-2424

Fax: 512-406-2695

Email: Leslie.Alexander@hhs.texas.gov

Home Depot USA Inc Darren Friesenhahn Ph: 866-589-0690 Mobile: 210-389-4862

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Payment Ter	ms Freight Terms	Ship Via		•	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-3-000	0313480
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			Date 03/29/23	Revision	Page 2
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Vendor: 1581853319 0 HOME DEPOT USA INC PO BOX 9001043 DEPT 32-2540185182 LOUISVILLE KY 402901043 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	ERVICES	
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov	

				Purchaser:	Alexander,Leslie L	. 51	512/406-2424	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
Email: darren_friesenhahn@homedepot.com								
OMNIA GPO and DSHS Contract # HHS000918300001								
OMNIA GF	OMNIA GPO and Home Depot Pro Contract # 16154							

1-1	1001392664, FLASHLIGHT	450-32	3.00	EA	15.87000 Schedule Total		03/31/2023
2-1	1002757131, EXTENSION CORD	450-24	1.00	EA	Item Total for Line 1 34.45000 Schedule Total	\$34.45 \$34.45	03/31/2023
3-1	277738, EXTENSION CORD	450-24	1.00	EA		\$19.97 \$19.97	03/31/2023
4-1	855200, HANGING WIRE	232-41	1.00	EA	5.27000 Schedule Total		03/31/2023
5-1	SCHEDULED DELIVERY	962-86	1.00	LOT	8.99000 Schedule Total Item Total for Line 5	\$8.99	03/29/2023

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specification	by informal bid, Invitation for Offer, or Recus, terms, and conditions set forth in the adve	Date 03/29/23	Revision	Page 3			
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				Fax: Email:	512/458-7442 invoices@dshs.texas	s.gov	
		Class/Item	Ouantity	Purchaser: UOM	Alexander,Leslie L		406-2424 Due Date

Total PO Amount \$116.29

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

Lastin Hant S, CTP

03/29/2023