

# Department of State Health Services

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> FOB Dest. Prepaid & Allowed	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000313512</b>
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.			<b>Date</b> 03/30/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
			<b>Page</b> 1

**Vendor:** 1862161688 9  
ODP BUSINESS SOLUTIONS LLC  
PO BOX 660113  
DALLAS TX 75266-0113  
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:** 512/458-7442  
**Email:** invoices@dshs.texas.gov

**Purchaser:** Fletcher, Patricia Rose

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

AGENCY CONTACT:  
Name: Joe Rodriguez  
Phone: 512/776-3223  
Email: joe.rodriguez@dshs.texas.gov

PURCHASER:  
Name Patricia Fletcher  
Phone: 512/406-2538  
Email: patricia.fletcher@hhs.texas.gov

VENDOR: ODP Business  
Name: Richard Merten  
Phone: 832/477-6118  
Email: richard.merten@odpbusiness.com  
Procurement methods were evaluated, and the best value is provided using the TXMAS contract.  
Txmas Contract: TxMAS-20-7501  
Term: 12/16/2019 - 3/31/2023 no renewals

Smartbuy PO: 23122860

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

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO. FREIGHT: F.O.B. Destination Freight prepaid Allowed. Delivery hours are from 8-11:30am and 1-4:30pm M-F Except State Holidays

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

1-1	Paper Mate Write Bros Grip Ballpoint Pens, Blue, CC: 62080	620-80	1.00	DOZ	6.04000	\$6.04	03/30/2023
<b>Schedule Total</b>						\$6.04	
<b>Item Total for Line 1</b>						\$6.04	
2-1		620-80	2.00	DOZ	8.07000	\$16.14	03/30/2023

# Department of State Health Services

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> FOB Dest. Prepaid & Allowed	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000313512</b>
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.			<b>Date</b> 03/30/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
			<b>Page</b> 2

**Vendor:** 1862161688 9  
ODP BUSINESS SOLUTIONS LLC  
PO BOX 660113  
DALLAS TX 75266-0113  
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:** 512/458-7442  
**Email:** invoices@dshs.texas.gov

**Purchaser:** Fletcher, Patricia Rose

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
	Paper Mate FlexGrip Ultra Ballpoint Pens, Red, CC: 62080						
					<b>Schedule Total</b>	\$16.14	
					<b>Item Total for Line 2</b>	\$16.14	
3-1	Avery Print-To-The-Edge Permanent Address Laser Labels, CC: 61551	615-51	1.00	BOX	10.22000	\$10.22	03/30/2023
					<b>Schedule Total</b>	\$10.22	
					<b>Item Total for Line 3</b>	\$10.22	
4-1	BIC Wite-Out Exact Liner Correction Tape, 1/5in Line Coverage, 236in, 4. CC: 61529	615-29	2.00	PCK	6.81000	\$13.62	03/30/2023
					<b>Schedule Total</b>	\$13.62	
					<b>Item Total for Line 4</b>	\$13.62	
5-1	Paper Mate Write Bros Grip Ballpoint Pens, Black, CC: 62080	620-80	1.00	DOZ	6.04000	\$6.04	03/30/2023
					<b>Schedule Total</b>	\$6.04	
					<b>Item Total for Line 5</b>	\$6.04	
6-1	Post-it er Notes, 100%, 4in x 6in, Lind, Helsinki, 5 Pads, CC: 61562	615-62	3.00	PCK	7.42000	\$22.26	03/30/2023
					<b>Schedule Total</b>	\$22.26	
					<b>Item Total for Line 6</b>	\$22.26	
7-1	Post-it Durable Filing Tabs, CC: 61593	615-93	3.00	PCK	1.84000	\$5.52	03/30/2023

# Department of State Health Services

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> FOB Dest. Prepaid & Allowed	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000313512</b>
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.			<b>Date</b> 03/30/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
			<b>Page</b> 3

**Vendor:** 1862161688 9  
ODP BUSINESS SOLUTIONS LLC  
PO BOX 660113  
DALLAS TX 75266-0113  
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:** 512/458-7442  
**Email:** invoices@dshs.texas.gov

**Purchaser:** Fletcher, Patricia Rose

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
					<b>Schedule Total</b>	\$5.52	
					<b>Item Total for Line 7</b>	\$5.52	
8-1	ODB Natural Wood Pencils, #2 Lead, Medium Soft, 96, CC: 62060	620-60	1.00	PCK	8.08000	\$8.08	03/30/2023
					<b>Schedule Total</b>	\$8.08	
					<b>Item Total for Line 8</b>	\$8.08	
<b>Total PO Amount</b>						\$87.92	

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.

<b>Authorized By</b> <i>Patricia Fletcher, CFO, CTCM</i>	<b>03/30/2023</b>
---	-------------------