

Health and Human Services Commission

Purchase Order

TX SmartBuy PO ID 23122922

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000313542
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 03/30/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
			Ship To: 5035 - Rusk:805 N Dickinson Dr HEALTH & HUMAN SERVICES COMMISSION 805 N Dickinson Dr PO Box 318 Rusk TX 75785 United States

Vendor: 1741976051 1
WORKQUEST
1011 E 53RD 1/2 ST
AUSTIN TX 787511703
United States

Bill To: Invoice - DADS
HEALTH & HUMAN SERVICES COMMISSION
424 Mesquite Dr
PO Box 1132
Mexia TX 76667
United States

Fax: 254/562-1894
Email: 718Accounting@hhs.texas.gov

Purchaser: Torres, Joseph Ryan

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.
 FREIGHT: F.O.B. Destination Freight Prepaid Allowed
 DELIVERY: 14-20 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

AGENCY CONTACT:
 Rusk SH
 Steve Irwin, WHSE Supvr.
 903-683-7116
 Steve.Irwin@hhs.texas.gov
HHSC BUYER:
 Joseph Torres, CTCD
 512-406-2413
 Joseph.Torres@HHS.Texas.Gov
VENDOR:
 Workquest
 512-451-8145
 Customerservice@workquest.com

FY23
 PURCHASING METHOD: EX/0
 Purchase made under the Authority of Texas Government Code 2155.441 (WorkQuest/TIBH Set-Aside)
 Term Contract: 207-S2, 485-S1, 645-S1
 Smartbuy PO: 23122922
REQUIREMENTS/LIMITATIONS:
 This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding.
 Invoice per 34 TAC §20.487, amended effective May 1, 2022
 Requisition MIM2313318 Line(s): 4,5,38,45

1-1	207-72-50200-9 LABEL ADRS AVRY 5161 1X4 WRKQST 20772502009 100/BX	207-72	84.00	BX	24.60000	\$2,066.40	04/13/2023
Schedule Total						\$2,066.40	
Item Total for Line 1						\$2,066.40	
2-1	207-72-50203-3	207-72	42.00	BX	23.34000	\$980.28	04/13/2023

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Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
	LABEL ADRS AVRY 5160 1X2-5/8 WRKQST 20772502033 3000/BX						
					Schedule Total	\$980.28	
					Item Total for Line 2	\$980.28	
3-1	645-21-21015-9B PAPER COPY 8.5X11 10RM/CTN WRKQST MULTIPLES	645-21	240.00	CTN	48.61000	\$11,666.40	04/19/2023
					Schedule Total	\$11,666.40	
					Item Total for Line 3	\$11,666.40	
4-1	665-24-11502-9 LINER PLAS CLR 55GAL 250/CS WRKQST 48505115029	665-24	30.00	CS	105.14000	\$3,154.20	04/13/2023
					Schedule Total	\$3,154.20	
					Item Total for Line 4	\$3,154.20	
					Total PO Amount	\$17,867.28	

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

Joseph Tamm, CTCD

03/30/2023