

# Department of State Health Services

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-4-0000314035</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> 09/01/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 1
			<b>Ship To:</b> 1902 - Temple:2408 S 37th St DEPARTMENT OF STATE HEALTH SERVICES 2408 S 37th St Temple TX 76504 United States

**Vendor:** 1740841790 9  
WAUKESHA-PEARCE INDUSTRIES LLC  
PO BOX 35068  
HOUSTON TX 772355068  
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:** Andres,William J

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

TsCs  
FY24 funding  
SP/E  
Requisition 0000223107 Pricing per Quote  
PO Service Dates 09/01/2023 to 08-31-2024  
Goods and/or services are to be delivered and invoiced after September 1, 2023

Attached Terms and Conditions apply to this Purchase Order.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2024 are automatically canceled.

Vendor contact  
Robert Syzdek  
210-449-6470  
Robert.Syzdek@wpi.com

Agency contact  
Heather Clark  
254-771-6799  
heather.clark@dshs.texas.gov  
Invoicing and payments: Penny.jones@dshs.texas.gov

PCS contact  
Will Andres  
512-776-2899  
will.andres@hhs.texas.gov

1-1	Generator maintenance for DSHS Region 7 Temple office 09/01/23- 08/31/24. This includes two maintenance visits in FY23.	936-39	1.00	YR	2365.75000	\$2,365.75	09/01/2023
-----	--	--------	------	----	------------	------------	------------

**Schedule Total**                   \$2,365.75

# Department of State Health Services

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-4-0000314035</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> 09/01/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 2
			<b>Ship To:</b> 1902 - Temple:2408 S 37th St DEPARTMENT OF STATE HEALTH SERVICES 2408 S 37th St Temple TX 76504 United States

**Vendor:** 1740841790 9  
WAUKESHA-PEARCE INDUSTRIES LLC  
PO BOX 35068  
HOUSTON TX 772355068  
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:** Andres, William J

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
<b>Item Total for Line 1</b>							\$2,365.75
<b>Total PO Amount</b>							\$2,365.75

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>  CTCO, CTCM	<b>04/06/2023</b>
---	-------------------