

# Health and Human Services Commission

## Purchase Order

Dispatch via Print

|  |   |                             |   |
|--|---|-----------------------------|---|
| <b>Payment Terms</b><br>Net 30   | <b>Freight Terms</b><br>Prepaid & Allow | <b>Ship Via</b><br>BEST WAY | <b>Purchase Order</b><br><b>HHSTX-3-0000314309</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><br>04/11/23   |
| <b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>   |   |                             | <b>Revision</b><br>6079 - San Antonio:6711 S New Brau<br>HEALTH & HUMAN SERVICES COMMISSION<br>6711 S New Braunfels Ave<br>Ste 500<br>San Antonio TX 78223<br>United States |
|  |   |                             | <b>Page</b><br>1  |

**Vendor:** 1862161688 9  
ODP BUSINESS SOLUTIONS LLC  
PO BOX 660113  
DALLAS TX 75266-0113  
United States

**Bill To:** Invoice-DSHS Accounts Payable  
HEALTH & HUMAN SERVICES COMMISSION  
6711 S New Braunfels  
Ste 100  
San Antonio TX 78223  
United States

**Fax:** 210/531-7883  
**Email:** SAHAccounting@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: SP/E

Requisition #: 0000226360

INVOICING - See above for Bill to Information

See above for SHIP TO ADDRESS ON PO

AGENCY CONTACT:  
Name: Melissa Schulz / 210-531-8207  
Email: Melissa.Schulz@hhs.texas.gov

HHSC terms and conditions attached

Purchaser Information:  
Name: Leslie Alexander  
Phone #: 512-406-2424  
Email Address: Leslie.Alexander@hhs.texas.gov

Vendor Information:  
VID: 18621616889  
Contractor: ODP Business Solutions, LLC  
Contact Name: Richard Merten  
Email: StateofTexas@odpbusiness.com  
Phone: (832) 477-6118  
Alternate Contact Name: Lori Pickering

Freight terms are FOB Destination Prepaid and Allowed  
Terms: Net 30

|     |  |        |      |    |          |         |            |
|-----|--|--------|------|----|----------|---------|------------|
| 1-1 | Item #: 160260 - Swingline Optima 20<br>Electric Stapler | 605-85 | 1.00 | EA | 55.42000 | \$55.42 | 04/13/2023 |
|-----|--|--------|------|----|----------|---------|------------|

|                              |         |
|------------------------------|---------|
| <b>Schedule Total</b>        | \$55.42 |
| <b>Item Total for Line 1</b> | \$55.42 |

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**Email:** SAHAccounting@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   |
|------------------------------|--|------------|----------|-----|----------|--|------------|
| 2-1                          | Item #: 173336 - Scotch® Desk Tape Dispenser, 100% Recycled, Black                             | 615-60     | 6.00     | EA  | 1.82000  | \$10.92  | 04/13/2023 |
| <b>Schedule Total</b>        |  |            |          |     |          | <u>\$10.92</u>   |            |
| <b>Item Total for Line 2</b> |  |            |          |     |          | <u>\$10.92</u>   |            |
| 3-1                          | Item #: 4500836 - Bostitch Personal Electric Pencil Sharpener - x 4" Width x 8.3" Depth - Gray | 605-60     | 1.00     | EA  | 39.19000 | \$39.19  | 04/13/2023 |
| <b>Schedule Total</b>        |  |            |          |     |          | <u>\$39.19</u>   |            |
| <b>Item Total for Line 3</b> |  |            |          |     |          | <u>\$39.19</u>   |            |
| <b>Total PO Amount</b>       |  |            |          |     |          | <span style="border: 1px solid black; padding: 2px;">\$105.53</span> |            |

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><br> | <b>04/11/2023</b> |
|--|-------------------|

