Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via			EV 0 000004 4074
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	ΓX-3-0000314371
specifications, terms conforming response guarantees goods or requirements.	rmal bid, Invitation for Offer, or and conditions set forth in the acts become a part of this numbered services delivered meet or exceed ping papers, invoices, and correct order Number.	dvertisement and vendor's I purchase order. Contractor I numbered purchase order	Date 04/11/23 Ship To:	Revision 5950 - El Paso:6700 Delta HEALTH & HUMAN SER 6700 Delta Dr 6700 Delta Dr El Paso TX 79905 United States	
Vandam 17/	12262220 4		Dill To.	Invoice DSHS Accounts De	nyahla

Vendor: 1742262229 4

PERRY OFFICE PRODUCTS INC

PO BOX 1200

TEMPLE TX 765031200

United States

Bill To: Invoice-DSHS Accounts Payable

DEPARTMENT OF STATE HEALTH SERVICES

1200 E Brin PO Box 70 Terrell TX 75160 United States

Fax: 972/551-8052

Email: DSHS.TSHBusinessOffice@dshs.texas.gov

Purchaser: Klekar, Dorian Nogueira

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: 14 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: Marisa Gamboa 915-782-6575

marisa.gamboa@hhs.texas.gov

Ship to Attn: Marisa Gamboa

HHSC BUYER: Dorian Klekar

dorian.klekar@hhs.texas.gov

VENDOR:

Perry Office Products Inc. Michelle Sandoval Ph: 512-763-8800 michelles@perryop.com

PURCHASING METHOD: SP/E Not to Exceed \$10,000.00

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 # 229337

1-1 665-67 1.00 LOT 4999.00000 \$4,999.00 09/01/2023

Health and Human Services Commission

Purchase Order

Ship Via

Dispatch via Print

Net 30	Prepaid & Allow	BEST WAY	Purchase Orde	er	HHSTX-3-000031437		
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 04/11/23	Revision		Page 2	
guarantees g requirement All shipmen	responses become a part of this numbered pugoods or services delivered meet or exceed nots. nts, shipping papers, invoices, and correspurchase Order Number.	Ship To:	HEALTH & H 6700 Delta Dr 6700 Delta Dr	6700 Delta Dr El Paso TX 79905			
Vendor:	1742262229 4 PERRY OFFICE PRODUCTS INC PO BOX 1200 TEMPLE TX 765031200 United States		Bill To:	Invoice-DSHS Accounts Payable DEPARTMENT OF STATE HEALTH SERVIC 1200 E Brin PO Box 70 Terrell TX 75160 United States Fax: 972/551-8052 Email: DSHS.TSHBusinessOffice@dshs.texas.gov		I SERVICES	
						as.gov	
			Purchaser:	Klekar,Dorian	n Nogueira		
Line-Sch	Inventory Item ID - Line Description	Class/Item Quanti	ty UOM	PO Price	Extended Amt	Due Date	
			Sch	hedule Total	\$4,999.00		
			Item Tota	al for Line 1	\$4,999.00		
			Total	PO Amount	\$4,999.00		

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.

Payment Terms

Freight Terms

Authorized By

Johan Klekan

04/11/2023