## Health and Human Services Commission

### Purchase Order

Dispatch via Print

No. 30     Propriot & Allow     Pristr WAY     Purchase Order     HHSTX-3-0000314451       Indercised printernal bid, invation for Offer, or Reguest for Proposal, all dependentions, terms, and conditions set forth in the advertisement and vendor's confirming response become a part of this numbered purchase order. Contractor or exceed numbered purchase order. Contractor of this numbered purchase order. Contractor of the advertisement and vendor's confirming response become a part of this numbered purchase order. Contractor of the advertisement and vendor's confirming response become a part of this numbered purchase order. Contractor of the advertisement and vendor's confirming response become a part of this numbered purchase order. Contractor of the advertisement is numbered purchase order. Contractor of the number of the advertisement and vendor's confirming response become a part of the advertisement is numbered purchase order. Contractor of the other set of the advertisement is numbered purchase order. Contractor of the other set of the advertisement is numbered purchase order. Contractor of the other set of the other						Dispa	
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Vender:         IB2151688 9 ODP JUSINESS SOLUTIONS LLC PUBOX 660113 DALLAS TX 75266-0113 DALLAS TX 75266-0113 DALLAS TX 75266-0113 DALLAS TX 75266-0113         Bit To:         Terrell SH Whse HEALTINE HUMAN SERVICES COMMISSION 1200 E bin proveil TX 75160 United Stars           Email:         DSHS.TSHBusinessOffice@debt.texas.gov         Email:         DSHS.TSHBusinessOffice@debt.texas.gov           FY23 CLASS ITEM 64593 SCOR Division: 19 - State Operated Facilities         Sile To:         Erest, Maria Ana           FY23 CLASS ITEM 64593 SCOR Division: 19 - State Operated Facilities         Sile To:         Erest, Maria Ana           FY23 CLASS ITEM 64593 SCOR Division: 19 - State Operated Facilities         Sile To:         Erest, Maria Ana           FY23 CLASS ITEM 64593 SCOR Division: 19 - State Operated Facilities         Sile To:         Erest, Maria Ana           FY23 CLASS ITEM 64593 SCOR Division: 19 - State Operated Facilities         Sile To:         Erest, Maria Ana           FY23 CLASS ITEM 64593 SCOR Division: 19 - State Operated Facilities         Sile To:         Erest, Maria Ana           FY28 CLASS ITEM 64593 SCOR Division: 19 - State Operated Facilities         Sile To:         Erest, Maria Ana           SUPPING INSTRUCTIONS: Sile according to the DUE DATES apeofied on the PO.         FreeChtr: PO.         FreeChtr: PO.           FY28 CLASS TRED 0450420         File National To: Operate To: Poil Note Poil	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. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Ship To:	4547 - Wichita Falls:6515 Kemp Blv HEALTH & HUMAN SERVICES COMMISSION 6515 Kemp Blvd PO Box 300 Wichita Falls TX 76308		
Purchaser:         Breest. Maria Ana           Line-Sch         Inventory Item ID - Line Description         Class/Item         Quantity         UOM         PO Price         Extended Amt         Due Date           FY23 CLASS ITEM 645/33         SCOR Division: 19 - State Operated Facilities         SSUPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.         FREIGHT: F-C0.8.	OI PC DA	DP BUSINESS SOLUTIONS LLC D BOX 660113 ALLAS TX 75266-0113		Bill To:	Terrell SH Whse HEALTH & HUI 1200 E Brin PO Box 70 Terrell TX 75160		MMISSION
Line-Sch Inventory Item ID - Line Description Class/Item Quantity UOM PO Price Extended And Due Date FY23 CLASS ITEM 645/33 SCOR Division: 19 - State Operated Facilities SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO. FREIGHT: F.O.B. Destination Freight Prepaid Allowed DELVERY: 3-5 Days After Receipt of PO Delivery hours are from 8:0-011:30 AM and 1:0-0-30 PM Monday - Friday except designated State Holidays "PLEASE HAVE VENDORS SEND INVOICES VIA EMAIL TO DSHS.TSHBusinessOffice@dshs.texas.gov ** AGEINCY CONTACT: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO *** SHIP TO ATTN: "**PACK				Email:	DSHS.TSHBusin	essOffice@dshs.texas	s.gov
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SCOR Division: 19 - State Operated Facilities SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO. FREIGHT: F.O.B. Destination Freight Prepaid Allowed DELIVERY: 3-5 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 ""PLEASE HAVE VENDORS SEND INVOICES VIA EMAIL TO DSHS.TSHBusinessOffice@dshs.texas.gov ** AGENCY CONTACT: ""PLACKE TAVE VENDORS SEND INVOICES VIA EMAIL TO DSHS.TSHBusinessOffice@dshs.texas.gov ** AGENCY CONTACT: ""PLACKE TAVE VENDORS SEND INVOICES VIA EMAIL TO DSHS.TSHBusinessOffice@dshs.texas.gov ** AGENCY CONTACT: ""PLACKE TAVE VENDORS SEND INVOICES VIA EMAIL TO DSHS.TSHBusinessOffice@dshs.texas.gov ** AGENCY CONTACT: ""PLACKE TAVE VENDORS SEND INVOICES VIA EMAIL TO DSHS.TSHBusinessOffice@dshs.texas.gov ** AGENCY CONTACT: ""PLACKE TAVE VENDORS SEND INVOICES VIA EMAIL TO DSHS.TSHBusinessOffice@dshs.texas.gov ** AGENCY CONTACT: ""PLACKE TAVE VENDORS SHOW PO NUMBER AND ATTN CONTACT INFO *** AGENCY CONTACT: ""PLACKE TAVE VENDORS SHOW PO NUMBER AND ATTN CONTACT INFO *** AGENCY CONTACT: ""PLACKE TAVE VENDORS SHOW PO NUMBER AND ATTN CONTACT INFO *** AGENCY CONTACT: ""PLACKE TAVE VENDORS SHOW PO NUMBER AND ATTN CONTACT INFO *** AGENCY CONTACT: ""PLACKE TAVE VENDORS SHOW PO NUMBER AND ATTN CONTACT INFO *** AGENCY CONTACT: ""PLACKE TAVE TAVE DESCHOM PO NUMBER AND ATTN CONTACT INFO *** AGENCY CONTACT: ""PLACKE TAVE TAVE DESCHOM PO NUMBER AND ATTN CONTACT INFO *** AGENCY CONTACT: ""PLACKE TAVE TAVE DESCHOM PO NUMBER AND ATTN CONTACT INFO *** AGENCY CONTACT: ""PLACKE TAVE TAVE DESCHOM PO NUMBER AND ATTN CONTACT INFO *** AGENCY CONTACT: ""PLACKE TAVE TAVE DESCHOM PO NUMBER AND ATTN CONTACT INFO *** AGENCY CONTACT: ""PLACKE TAVE TAVE AGENCE TOT TO TO TO TAVE TAVE AGENCY TAVE AG	Line-Sch Inver	ntory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
VID: 1862161688 Contractor: ODP Business Solutions Contact Name: Lisa Patton (lisa.patton@officedepot.com) Email: stateoftexas@officedepot.com Phone: 713) 878-2158 TERMS NET 30 QUOTE PRICED PER DEDICATED WEBSITE Omnia and ODP Contract Number R190303 Omnia Office Depot HHS Account Number # 46319643 PURCHASING METHOD: EX-0 Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs. REQUIREMENTS/LIMITATIONS:	Delivery hours are **PLEASE HAVE AGENCY CONTA ***PACKING LIST SHIP TO ATTN: Joshua Domingue 940-689-5266 Joshua.domingue HHSC BUYER: Ana Breest CTCD Direct: 512) 406-2 Ana.Breest@hhs.	e from 8:00-11:30 AM and 1:00-4 VENDORS SEND INVOICES VI CT: REQUIRED TO SHOW PO NU z z@hhs.texas.gov CTCM 2679 CELL 512-660-3139	A EMAIL TO DSHS.TSHBU	usinessOffice@dshs.tex			
QUOTE PRICED PER DEDICATED WEBSITE Omnia and ODP Contract Number R190303 Omnia Office Depot HHS Account Number # 46319643 PURCHASING METHOD: EX-0 Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs. REQUIREMENTS/LIMITATIONS:	VID: 1862161688 Contractor: ODP I Contact Name: Lis Email: stateoftexa	sa Patton (lisa.patton@officedepo s@officedepot.com	ot.com)				
Omnia and ODP Contract Number R190303 Omnia Office Depot HHS Account Number # 46319643 PURCHASING METHOD: EX-0 Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs. REQUIREMENTS/LIMITATIONS:	TERMS NET 30						
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			ty of lawful appropriations l	by the Texas Legislature	e. FY2023 fundin	g.	

### **Health and Human Services Commission**

#### **Purchase Order**

**Dispatch via Print** 

Not 30	rms Freight T		Ship V		Burchese Order		HHSTX-3-0	000314451
Net 30         Prepaid & Allow         BEST WAY           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			l; all ndor's	Purchase Order Date 04/12/23	Revision	111017-3-0	<b>000314431</b> Page 2	
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.					Ship To:	4547 - Wichita Falls:6515 Kemp Blv HEALTH & HUMAN SERVICES COMMISSION 6515 Kemp Blvd PO Box 300 Wichita Falls TX 76308 United States		
Vendor:	1862161688 9 ODP BUSINESS 5 PO BOX 660113 DALLAS TX 7520 <b>United States</b>	SOLUTIONS LLC 56-0113			Bill To:	Terrell SH Wh HEALTH & H 1200 E Brin PO Box 70 Terrell TX 751 United States	UMAN SERVICES CO	OMMISSION
					Email:	DSHS.TSHBusinessOffice@dshs.texas.gov		
Line-Sch	Inventory Item ID -	Line Description	Class/Item	Quantity	Purchaser: UOM	Breest,Maria	Ana Extended Amt	Due Date
			Clubb/ Itelli	Quantity	00111	101160	Extended Thirt	Due Dute
	34 TAC §20.487, am	ended effective May	1, 2022					
Invoice per	34 TAC §20.487, am 0000221754		1, 2022 645-31	10.00	РСК	9.27000	\$92.70	04/12/2023
Invoice per Requisition Quote	34 TAC §20.487, am	weight Index Card		10.00				04/12/2023
Invoice per Requisition Quote	34 TAC §20.487, am 0000221754 Wausau Exact Heavy Stock, 8 1/2in x 11in,	weight Index Card		10.00	Sche	dule Total	\$92.70	04/12/2023
Invoice per Requisition Quote	34 TAC §20.487, am 0000221754 Wausau Exact Heavy Stock, 8 1/2in x 11in,	weight Index Card 90 Lb, White; Item 8 Multipurpose Paper Size, 20 Lb,		10.00	Sche		\$92.70	04/12/2023
Invoice per Requisition Quote	34 TAC §20.487, am 0000221754 Wausau Exact Heavy Stock, 8 1/2in x 11in, # 240556 Xerox Vitality Colors Printer Paper, Letter 1	weight Index Card 90 Lb, White; Item 8 Multipurpose Paper Size, 20 Lb,	645-31		Sche Item Total f	dule Total for Line 1	\$92.70 \$92.70 \$171.20	
Invoice per Requisition Quote	34 TAC §20.487, am 0000221754 Wausau Exact Heavy Stock, 8 1/2in x 11in, # 240556 Xerox Vitality Colors Printer Paper, Letter 1	weight Index Card 90 Lb, White; Item 8 Multipurpose Paper Size, 20 Lb,	645-31		Sche Item Total f RM Sche	dule Total for Line 1 8.56000	\$92.70 \$92.70 \$171.20 \$171.20	

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 MBrust CTCD,CTCM

<u>04/14/2023</u>