## **Health and Human Services Commission**

## **Purchase Order**

Dispatch via Print

Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHST	X-3-0000314486
specifications	by informal bid, Invitation for Offer, or I , terms, and conditions set forth in the ac	dvertisement and vendor's	<b>Date</b> 04/12/23	Revision	Page 1
	esponses become a part of this numbered ods or services delivered meet or exceed	•	Ship To:	5059 - Kerrville:721 Thompson Dr HEALTH & HUMAN SERVICES COMMISSION 721 Thompson Dr	
	s, shipping papers, invoices, and corre chase Order Number.	espondence must be identified		Kerrville TX 78028 United States	
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR		Bill To:	Invoice-DSHS Accounts Pay HEALTH & HUMAN SERV 6711 S New Braunfels	

**United States** 

PFLUGERVILLE TX 786605117

Ste 100

Fax: 210/531-7883 SAHAccounting@dshs.texas.gov Email:

San Antonio TX 78223 United States

Omisore, Oluwaseyi Samue 512/776-4242 Purchaser: Line-Sch **UOM Inventory Item ID - Line Description** Class/Item Quantity PO Price Extended Amt **Due Date** 

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

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

DELIVERY: 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

AGENCY CONTACT: PRISCILLA JARECKE 830-896-2211 EXT 5218 priscilla.jarecke@hhs.texas.gov

Ship to Attn: Tracy Lisenby

830-896-2211 x EXT 6620 tracy.lisenby@hhs.texas.gov

HHSC BUYER:

Oluwaseyi Omisore, CTCD, CTCM

512-776-4242 Oluwaseyi.Omisore@hhs.texas.gov

VENDOR: SOUTH CENTRAL SUPPLY LLC (512)367-0311 sales@supplytexas.com

QUOTE#: Q17201

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 0000225930

1-1 640-60 20.00 CS 26.90000 \$538.00 04/20/2023

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Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extended Amt Due Date	
			Sche	dule Total\$538.00_	
			Item Total	for Line 1\$538.00_	
			Total Po	O Amount \$538.00	

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.

Authorized By

Oliwaseyi Omicore CTCD CTCM

04/13/2023