Health and Human Services Commission

Purchase Order

r						Dispa	tch via Print
Payment Te Net 30		Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order		HHSTX-3-00	000314496
specification	ns, terms, an	l bid, Invitation for Offer, or R d conditions set forth in the ad ecome a part of this numbered	vertisement and vendor's	Date 04/12/23	Revision		Page 1
guarantees go requirements All shipmen	goods or serv s. nts, shipping	vices delivered meet or exceed g papers, invoices, and corres		Ship To:			OMMISSION
with our Pu	rchase Ord	ler Number.			United States	-	
Vendor:	SOUT 828 BE	99880 8 H CENTRAL SUPPLY LLC ETTERMAN DR GERVILLE TX 786605117 States	R 4601 W Guadalupe St			MAN SERVICES CO pe St	OMMISSION
				Fax: Email:	512/424-6901 HHSC_AP@hhse	c.state.tx.us	
				Purchaser:	De La Rosa,Lin		
Line-Sch	Inventory	V Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
FREIGHT: I AGENCY C Ship to Attn +1 (512) 43 Jo.Kucera@ HHSC BUY Lindsey De 7766284 Lindsey.del VENDOR: South Centr sales@supp (512) 367 - Quote/Refe PURCHASI Not to Exce REQUIREM This PO is o	F.O.B. Des CONTACT: 1: Jo Ellen 18-4265 @hhs.texas /ER: 9 La Rosa larosa@hh tral Supply plytexas.co 0311 erence: Q10 ING METH eed \$10,00 MENTS/LIN contingent 34 TAC §2	stination Freight Prepaid All Kucera gov s.texas.gov om 6974 OD: SP/E 0.00 fITATIONS:	ility of lawful appropriations		e. FY2023 fundin	g.	
QUÔTE							
1-1		lividually Wrapped Hand Wipes, 1000 Wipes # 1M	345-94 8.00) PCK	60.99000	\$487.92	04/12/2023
				Sche	dule Total	\$487.92	
				Item Total	for Line 1	\$487.92	

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Tex Net 30	rms Freight Terms Prepaid & Allow	Ship V BEST		Purcl	hase Order		HHSTX-3-0	000314496
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						Revision		Page
guarantees go requirements All shipmen	responses become a part of this numbered proofs or services delivered meet or exceed nu- ts, shipping papers, invoices, and corresp rchase Order Number.	umbered purchas	se order	Ship 7				OMMISSION
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States			Bill T		Invoice-HHSC HEALTH & H 4601 W Guada Austin TX 787 United States	UMAN SERVICES Co lupe St	OMMISSION
						512/424-6901 HHSC_AP@hl	hsc.state.tx.us	
				Purch		De La Rosa,L		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM]	PO Price	Extended Amt	Due Date
2-1	Purell Hand Sanitizing Wipes, 100 Wipes/Box # 9022-10	345-94	4.00	PCK		8.99000	\$35.96	04/12/2023
					Sched	ule Total	\$35.96	
					Item Total fo	r Line 2	\$35.96	
3-1	Purell® 72-Count Healthcare Surface Disinfecting Wipes # 9370-12	345-94	204.00	PCK		6.75000	\$1,377.00	04/12/2023
					Sched	ule Total	\$1,377.00	
					Item Total fo	r Line 3	\$1,377.00	
					Total PO		\$1,900.88	

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	
Linosuy De La Rosa	<u>04/20/2023</u>