

# Health and Human Services Commission

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000314737</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> 04/14/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 1
			<b>Ship To:</b> 5070 - Harlingen: 1401 S Rangerville DEPARTMENT OF STATE HEALTH SERVICES 1401 S Rangerville Rd PO Box 2668 Harlingen TX 78552 United States

**Vendor:** 1742541399 8  
TROPHY PLUS  
717 E HARRISON AVE  
HARLINGEN TX 78509151  
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:** Breest, Maria Ana

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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SP/E - Spot Purchase Up to \$10,000.00 080-78  
 SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.  
 FREIGHT: F.O.B. Destination Freight Prepaid Allowed  
 DELIVERY: 10 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  
 \*\*\*\*\*SEND INVOICES TO: SAHAccounting@dshs.texas.gov\*\*\*\*\*

**AGENCY CONTACT:**  
 Name: Sergio Reyes  
 Phone: (956-364-8478  
 Email: Sergio.Reyes@hhs.texas.gov

**HHSC BUYER:**  
 Ana Breest, CTCD, CTCM  
 512-406-2679  
 ana.breest@hhs.texas.gov

Vendor ID: 1742541399  
 Name: Trophy Plus  
 Contact: Vilma Lewis  
 Phone: 956-425-1415  
 Email: trophyplusorders@gmail.com  
 Quote: #3202

**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, 2023  
 Requisition: 0000230086

1-1	Plaque 9x12 with LOGO Black aluminum Gold Text	080-78	1.00	EA	40.95000	\$40.95	04/14/2023
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**Schedule Total**                     \$40.95

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F3G010 F1110 7211 ADMIN SR

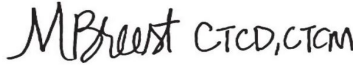
**Item Total for Line 1** \_\_\_\_\_ \$40.95

**Total PO Amount** \$40.95

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> 	<b>04/14/2023</b>
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