Department of State Health Services

Purchase Order

Dispatch via Print Payment Terms Freight Terms Ship Via HHSTX-3-0000314844 Net 30 Prepaid & Allow BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Date Revision Page specifications, terms, and conditions set forth in the advertisement and vendor's 04/17/23 1 conforming responses become a part of this numbered purchase order. Contractor Ship To: 5702 - Eagle Pass: 1593 S Veterans guarantees goods or services delivered meet or exceed numbered purchase order DEPARTMENT OF STATE HEALTH SERVICES requirements. 1593 S Veterans Blvd All shipments, shipping papers, invoices, and correspondence must be identified Eagle Pass TX 78852 with our Purchase Order Number. United States Vendor: 19009998808 Bill To: Invoice-DSHS Fiscal Claims SOUTH CENTRAL SUPPLY LLC DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) 828 BETTERMAN DR PFLUGERVILLE TX 786605117 PO Box 149347 United States Austin TX 78756 United States Fax: 512/458-7442 invoices@dshs.texas.gov Email: **Purchaser:** Alvarado, Veronica UOM Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity PO Price Extended Amt **Due Date** FY23 Purchase / Requisition #: 0000221464 Procurement Type: SP/E Not to Exceed \$7090.96 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 Quote #: Q17136 Primary Contact: Nellyda Cazares @ 830-758-4249 nellyda.cazares@dshs.texas.gov Purchaser: Veronica Alvarado @ 512-406-2505 Veronica.Alvarado@hhs.texas.gov Vendor Information: South Central Supply Customer Service @ 512-367-0311 sales@supplytexas.com Requirement / Limitations: This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding. 550-79 1-1 4.00 EA 352.99000 \$1,411.96 05/15/2023 In-Street Pedestrian Crosswalk Sign; Select Legend: STOP: # C-PED2-PNL-0SF-2-RK Schedule Total \$1,411.96 Item Total for Line 1 \$1,411.96

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Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States			Bill To:	Invoice-DSHS I DEPARTMEN 1100 W 49th St PO Box 149347	United States Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States		
				Fax: Email:	512/458-7442 invoices@dshs.	texas.gov		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Ouantity	Purchaser: UOM	Alvarado,Vero PO Price	nica Extended Amt	Due Date	
Line-Sch	Inventory item in - Line Description	Class/Itelli	Quantity	COM	TOTILE	Extended Amt	Due Date	
2-1	Omni Flex 48 Inch Tubular Traffic Delineator Pack; Color: White: # TSM48-WT-3MW-250B	550-79	1.00	РСК	5679.00000	\$5,679.00	05/15/2023	
				Se	chedule Total	\$5,679.00		
				Item Tot	Item Total for Line 2 \$5,679.0			
				Tota	l PO Amount	\$7,090.96		

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	
Veronica Alvarado, CTCD, CTCM	<u>05/01/2023</u>