

# 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-3-0000315143</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> 04/20/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> Page 1
			<b>Ship To:</b> 4551 - Austin:4301 N Lamar Blvd HEALTH & HUMAN SERVICES COMMISSION 4301 N Lamar Blvd Austin TX 78751 United States

**Vendor:** 1361150280 1  
W W GRAINGER INC  
DEPT 829455922  
PO BOX 419267  
KANSAS CITY MO 641416267  
United States

**Bill To:** Invoice-HHSC Accounting  
HEALTH & HUMAN SERVICES COMMISSION  
4601 W Guadalupe St  
Austin TX 78751  
United States

**Fax:** 512/424-6901  
**Email:** HHSC\_AP@hhsc.state.tx.us

**Purchaser:** Alexander, Leslie L 512/406-2424

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
----------	--------------------------------------	------------	----------	-----	----------	--------------	----------

FY23 Purchase

Procurement Type: SP/E

Requisition #: 0000228844

INVOICING - See above for Bill to Information

See above for SHIP TO ADDRESS ON PO

AGENCY CONTACT:  
Name: Yolanda Eason / 512-206-5911  
Email: Yolanda.Eason@hhs.texas.gov

HHSC terms and conditions attached

Purchaser Information:  
Name: Leslie Alexander  
Phone #: 512-406-2424  
Email Address: Leslie.Alexander@hhs.texas.gov

VENDOR INFORMATION:  
Vendor Name: W W Grainger Inc.  
Contact: Customer Services  
Telephone: 800-472-4643  
Email: scs.south@grainger.com

Grainger Quote #: 2054104857 / Date: 04/20/2023/ Customer #: 854266541

Freight Terms are FOB Destination Prepaid and Allowed/Add  
Terms: Net 30

1-1	Part #: BE12970 - Manufacturer: BARSKA - Metal Detector: Hand-Held, 1.7 lb.	680-44	1.00	EA	108.79000	\$108.79	04/27/2023
-----	---	--------	------	----	-----------	----------	------------

**Schedule Total** \_\_\_\_\_ \$108.79  
**Item Total for Line 1** \_\_\_\_\_ \$108.79

# 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-3-0000315143</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> 04/20/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> Page 2
			<b>Ship To:</b> 4551 - Austin:4301 N Lamar Blvd HEALTH & HUMAN SERVICES COMMISSION 4301 N Lamar Blvd Austin TX 78751 United States

**Vendor:** 1361150280 1  
W W GRAINGER INC  
DEPT 829455922  
PO BOX 419267  
KANSAS CITY MO 641416267  
United States

**Bill To:** Invoice-HHSC Accounting  
HEALTH & HUMAN SERVICES COMMISSION  
4601 W Guadalupe St  
Austin TX 78751  
United States

**Fax:** 512/424-6901  
**Email:** HHSC\_AP@hhsc.state.tx.us

**Purchaser:** Alexander, Leslie L 512/406-2424

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
----------	--------------------------------------	------------	----------	-----	----------	--------------	----------

**Total PO Amount** \$108.79

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**



**04/20/2023**