## **Health and Human Services Commission**

## **Purchase Order**

Payment Terms	Freight Terms	Ship Via	Dural Di		HHSTX-3-00	0031533	
Net 30 f advertised by info	Prepaid & Allow rmal bid. Invitation for Offer. or l	BEST WAY Request for Proposal: all	Purchase Order Date	Revision	<b>ППЗТХ-3-0</b>	70031532 Pag	
pecifications, terms	vertised by informal bid, Invitation for Offer, or Request for Proposal; all fications, terms, and conditions set forth in the advertisement and vendor's		04/24/23				
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order		Ship To:	5059 - Kerrville:721 Thompson Dr HEALTH & HUMAN SERVICES COMMISSION 721 Thompson Dr				
Requirements. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.							
			Kerrville TX 780 United States	28			
ODP B PO BO DALL	52161688 9		Bill To:	Invoice-DSHS A			
	OP BUSINESS SOLUTIONS LLC BOX 660113	2		HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States			
	ALLAS TX 75266-0113						
	ited States						
			_	010/501 5000			
			Fax: Email:	210/531-7883 SAHAccounting@dshs.texas.gov			
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Line-Sch Inven	tory Item ID - Line Description	Class/Item Quantity	Purchaser: UOM	Connell,Ron Le PO Price	Extended Amt	Due Date	
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Purchasing Metho Requisition #: HHS Requester: Lee Cl Phone #: +1 (830) Email: H.Clancy@ SHIP TO ATTN: Lu Purchaser Name: Phone #: 512-406 Email: ron.connell Vendor Name: OD	STX-3-0000228450 ancy 258-5211 hhs.texas.gov ee Clancy, +1 (830) 258-5211, Ron Connell 3-2666 I@hhs.texas.gov	H.Clancy@hhs.texas.gov					
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Purchasing Metho Requisition #: HHS Requester: Lee Cli Phone #: +1 (830) Email: H.Clancy@ SHIP TO ATTN: Lo Purchaser Name: D Phone #: 512-406 Email: ron.connell Vendor Name: OD Contact: Custome Phone #: (512) 42: Email: StateofTex Goods and/or serv Fhis purchase orde	STX-3-0000228450 ancy 258-5211 hhs.texas.gov ee Clancy, +1 (830) 258-5211, Ron Connell 5-2666 I@hhs.texas.gov OP Business Solutions er Service 2-7329 cas @OfficeDepot.com vices are to be delivered and in	voiced after September 1, 202 nued availability of lawful appro		•	A Procurement Mar	uual, and may	
Purchasing Metho Requisition #: HHS Requester: Lee Cl Phone #: +1 (830) Email: H.Clancy@ SHIP TO ATTN: Le Purchaser Name: Phone #: 512-406 Email: ron.connell /endor Name: OD Contact: Custome Phone #: (512) 42: Email: StateofTex Goods and/or serv This purchase ordo be cancelled at an Purchase made ur	STX-3-0000228450 ancy 258-5211 hhs.texas.gov ee Clancy, +1 (830) 258-5211, Ron Connell 3-2666 I@hhs.texas.gov OP Business Solutions er Service 2-7329 cas@OfficeDepot.com vices are to be delivered and in er is contingent upon the conti by time in whole or part without	voiced after September 1, 202 nued availability of lawful appro	ppriations by the Texa Health Care Purchasi	******* ing including grou			
Purchasing Metho Requisition #: HHS Requester: Lee Cli Phone #: +1 (830) Email: H.Clancy@ SHIP TO ATTN: Lu Purchaser Name: Phone #: 512-406 Email: ron.connell Vendor Name: OD Contact: Custome Phone #: (512) 42: Email: StateofTex Goods and/or serv This purchase ordo be cancelled at an Purchase made ur	STX-3-0000228450 ancy 258-5211 hhs.texas.gov ee Clancy, +1 (830) 258-5211, Ron Connell 5-2666 I@hhs.texas.gov OP Business Solutions er Service 2-7329 (as @OfficeDepot.com vices are to be delivered and in er is contingent upon the conti y time in whole or part without nder the Authority of Texas Go Depot Contract Number # R19 ot HHS Account Number # 463	voiced after September 1, 202 nued availability of lawful appro penalty. vernment Code 2155.1441 for	ppriations by the Texa Health Care Purchasi	****** ing including grou			

Schedule Total \$66.30

## **Health and Human Services Commission**

## **Purchase Order**

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Payment Ter Net 30	rms Freight Terms Prepaid & Allow	Ship V BEST		Purchase Ord	der	HHSTX-3-0	000315320	
specifications	by informal bid, Invitation for Offer, or Rea s, terms, and conditions set forth in the adve	ertisement and ve	endor's	<b>Date</b> 04/24/23	Revision		Page 2	
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				Ship To:	HEALTH & HU 721 Thompson	5059 - Kerrville:721 Thompson Dr HEALTH & HUMAN SERVICES COMMISSION 721 Thompson Dr Kerrville TX 78028 United States		
Vendor:	1862161688 9 ODP BUSINESS SOLUTIONS LLC PO BOX 660113 DALLAS TX 75266-0113 <b>United States</b>			Bill To:	HEALTH & HU 6711 S New Br Ste 100	San Antonio TX 78223		
				Fax: Email:	210/531-7883 SAHAccounting	g@dshs.texas.gov		
				Purchaser:	Connell,Ron L	ee		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
				Item To	otal for Line 1	\$66.30		
	DYMO 30251 Label Writer Address Labels, 30251, 1 1/8in x 3 1/2in, White, 130 Labels Per Roll, Pack Of 2 Rolls, #967253	615-51	14.00	PKG	7.58000	\$106.12	05/01/2023	
				S	Schedule Total	\$106.12		
				Item To	otal for Line 2	\$106.12		

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	
RCeef.	04/26/2023