Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHST	X-3-0000315386
If advertised specifications	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. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision	Page 1
guarantees go requirements All shipmen				5035 - Rusk:805 N Dickinson Dr HEALTH & HUMAN SERVICES COMMISSION 805 N Dickinson Dr PO Box 318 Rusk TX 75785 United States	
Vendor:	Vendor: 1741325946 0 INSCO DISTRIBUTION INC 12501 NETWORK BLVD SAN ANTONIO TX 782493306 United States		Bill To:	Invoice - DADS HEALTH & HUMAN SERV 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States	VICES COMMISSION

Quantity

Fax: 254/562-1894

Email: 718Accounting@hhs.texas.gov

Purchaser: Connell,Ron Lee

UOM PO Price Extended Amt Due Date

FY23 General Goods Blanket Purchase Order

SP/E

Line-Sch

Requisition #: HHSTX-3-0000227231

Inventory Item ID - Line Description

Requester Name: Jerry McClure Facility: Rusk State Hospital Phone #: 903-683-7621

Email: jerry.mcclure@hhs.texas.gov

Lead Contact: Edward Thornton, 903-683-3421, Edward.thornton@hhs.texas.gov

Purchaser Name: Ron Connell Phone #: 512-406-2666

Email: ron.connell@hhs.texas.gov

Vendor Name: INSCO Distributing, Inc.

Contact: Luke Wilaby Phone #: 903-561-8080 Email: lwilabay@insco.com

Goods and/or services are to be delivered and invoiced after September 1, 2022.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature CPA Procurement Manual, and may be cancelled at any time in whole or part without penalty.

Blanket Transactional Purchase Order FY23 (4/24/23 through 8/31/2023) for Rusk State Hospital. Total contract value is \$10,000.00 with no renewals. Total amount cannot exceed \$10,000.00 without authorization from the agency and PCS Purchaser.

Contractor will deliver products within three (3) days after release/call out has been received from the facility requestor.

Class/Item

HHSC does not commit to ordering specific dollar amounts with respect to this contract. Quantities may be increased or decreased upon need during the term of the contract. Forecasted quantities are estimates only and do not constitute a guarantee of purchase. The agency shall be obligated to pay for only those goods actually ordered and received by the agency. Any funds not utilized by 08-31-23 are automatically cancelled.

** VENDORS SEND INVOICES VIA EMAIL TO **

718Accounting@hhs.texas.gov

Invoicing and Payment: The invoice shall contain all the following in order to be considered for payment: PO number referenced, a unique invoice number, invoice date, and the total invoice amount. Each invoice shall also have an attached copy of the bill in order to be paid. Mail all original invoices to the BILL TO ADDRESS ON PO. Payment terms are net thirty days (30) unless a discount has been offered. Facility is not responsible for failure by the vendor to properly invoice which may delay payment processing.

Health and Human Services Commission

Purchase Order

Payment Terms	Freight Terms	Ship Vi	ia				
Net 30	Prepaid & Allow	BEST V	WAY	Purchase Order	<u>-</u>	<u> HSTX-3-00</u>	00315386
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. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Date 04/24/23	Revision			
			Ship To:	5035 - Rusk:805 N Dickinson Dr HEALTH & HUMAN SERVICES COMMISS 805 N Dickinson Dr PO Box 318 Rusk TX 75785 United States		MMISSION	
II 1 S	1741325946 0 INSCO DISTRIBUTION INC 12501 NETWORK BLVD SAN ANTONIO TX 782493306 United States			Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States 254/562-1894 718Accounting@hhs.texas.gov		MMISSION
				Fax: Email:			
				Purchaser:	Connell,Ron Lee		
	entory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date

1-1 031-67 1.00 LOT 10000.00000 \$10,000.00 04/24/2023 FY23 (Goods) - Parts and Supplies as \$10,000.00 Schedule Total Item Total for Line 1 \$10,000.00

\$10,000.00

Total PO Amount

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	
Reef.	04/24/2023