

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000315605
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.			Date 04/26/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
			Page 1

Vendor: 190099880 8
SOUTH CENTRAL SUPPLY LLC
828 BETTERMAN DR
PFLUGERVILLE TX 786605117
United States

Bill To: Invoice - HHSC
HEALTH & HUMAN SERVICES COMMISSION
4601 W Guadalupe St
PO Box 149030
Austin TX 78751
United States

Fax: 512/438-2086
Email: HHSC_AP@hhsc.state.tx.us

Purchaser: Evans,Jocelynn

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

FREIGHT: F.O.B. Destination Freight Prepaid Allowed

DELIVERY: 7 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

Ship Attention to: Christi Beal
Please contact when order is shipped and expected delivery date.

AGENCY CONTACT:
Name: Emersun Frechette
Phone: +1 (512) 438-2656
Email: emersun.frechette@hhs.texas.gov

Purchaser Information:
Name: Jocelynn Evans
Phone #512-776-6233
Email Address: jocelynn.evans@hhs.texas.gov

VENDOR:
South Central Supply
sales@supplytexas.com
512-367-0311

QUOTE # Q

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, 2022

Requisition # 0000221420

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Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Schedule Total							\$16.99
Item Total for Line 1							\$16.99
2-1	ZOOPIP Fireproof Document Box, File Box with Lock	655-88	1.00	EA	29.50000	\$29.50	05/03/2023
Schedule Total							\$29.50
Item Total for Line 2							\$29.50
3-1	DYMO File Folder Labels #30327	600-66	2.00	EA	19.99000	\$39.98	05/03/2023
Schedule Total							\$39.98
Item Total for Line 3							\$39.98
Total PO Amount							\$86.47

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

Jocelynn Evans, CTCD

04/26/2023