## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print Payment Terms** Ship Via Freight Terms HHSTX-3-0000315699 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 04/27/23 1 conforming responses become a part of this numbered purchase order. Contractor 1725 - Houston:1320 E 40th St Ship To: guarantees goods or services delivered meet or exceed numbered purchase order HEALTH & HUMAN SERVICES COMMISSION requirements. 1320 E 40th St All shipments, shipping papers, invoices, and correspondence must be identified PO Box 16017 with our Purchase Order Number. Houston TX 77022 United States Invoice-HHSC Financial Service 1862161688 9 Bill To: Vendor: ODP BUSINESS SOLUTIONS LLC HEALTH & HUMAN SERVICES COMMISSION PO BOX 660113 5425 Polk St PO Box 16017 DALLAS TX 75266-0113 **United States** Ste 220 Houston TX 77023 United States Fax: 713/767-2488 Email: Reg\_06\_Regional\_Budget\_PRF@hhsc.state.tx **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 #: 0000228845 INVOICING - See above for Bill to Information See above for SHIP TO ADDRESS ON PO AGENCY CONTACT: Name: Patricia Basquez / 713-696-8020 Email: Patricia.Basquez02@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: VID: 18621616889 Contractor: ODP Business Solutions, LLC Contact Name: Richard Merten Email: richard.merten@odpbusiness.com Phone: (832) 477-6118 Alternate Contact Name: Lori Pickering Freight terms are FOB Destination Prepaid and Allowed Terms: Net 30 1-1 615-29 480.00 EA 3.09000 \$1,483.20 05/01/2023 Supplier Part #: 662178, Manufacturer Part #: 68666 - Tombow® Mono® Correction Tape Refill, Single Line, 394", White

\$1,483.20

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Payment Ter Net 30	ms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-3-0000315699			
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			Ship To:	1725 - Houston:1320 E 40th St HEALTH & HUMAN SERVICES COMMISSION 1320 E 40th St PO Box 16017 Houston TX 77022 United States			
Vendor:	1862161688 9 ODP BUSINESS SOLUTIONS LLC PO BOX 660113 DALLAS TX 75266-0113 <b>United States</b>		Bill To:	Invoice-HHSC Fir HEALTH & HUM 5425 Polk St PO Box 16017 Ste 220 Houston TX 7702 United States	IAN SERVICES CO	OMMISSION	
			Fax: Email:	713/767-2488 Reg_06_Regional_	_Budget_PRF@hhsc	e.state.tx	
			Purchaser:	Alexander,Leslie	eL 51	2/406-2424	
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date	
				Item Total for Line 1\$1,483.20			
			Total P	O Amount	\$1,483.20		

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	
Justic Alunt S, CTP	<u>04/27/2023</u>