

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000315761
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 04/27/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 1907 - Harlingen:601 W Sesame Dr DEPARTMENT OF STATE HEALTH SERVICES 601 W Sesame Dr Harlingen TX 78550 United States
			Page 1

Vendor: 1862161688 9
ODP BUSINESS SOLUTIONS LLC
PO BOX 660113
DALLAS TX 75266-0113
United States

Bill To: Invoice-DSHS Fiscal Claims
DEPARTMENT OF STATE HEALTH SERVICES
1100 W 49th St (RBB)
PO Box 149347
Austin TX 78756
United States

Fax: 512/458-7442
Email: invoices@dshs.texas.gov

Purchaser: Breest, Maria Ana

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

FY23 CLASS ITEM 616/33
SCOR Division: 19 - State Operated Facilities

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.
FREIGHT: F.O.B. Destination Freight Prepaid Allowed
DELIVERY: 3-5 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
PLEASE HAVE VENDORS SEND INVOICES VIA EMAIL TO: invoices@dshs.texas.gov

AGENCY CONTACT:
***PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO ***
RAVEN KEITH
RAVEN.KEITH@DSHS.TEXAS.GOV
956-421-5511

HHSC BUYER:
Ana Breest CTCD,CTCM
Direct: 512) 406-2679 CELL 512-660-3139
Ana.Breest@hhs.texas.gov

VENDOR:
ODP Business Solutions, LLC
VID: 1862161688
Richard Merten
(832) 477-6118
richard.merten@odpbusiness.com
TERMS NET 30

QUOTE PRICED PER DEDICATED WEBSITE

Omnia and ODP Contract Number R190303
Omnia Office Depot HHS Account Number # 46319643

PURCHASING METHOD: EX-0
Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

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, 2023

Requisition 0000226151

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000315761
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 04/27/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 1907 - Harlingen:601 W Sesame Dr DEPARTMENT OF STATE HEALTH SERVICES 601 W Sesame Dr Harlingen TX 78550 United States
			Page 2

Vendor: 1862161688 9
ODP BUSINESS SOLUTIONS LLC
PO BOX 660113
DALLAS TX 75266-0113
United States

Bill To: Invoice-DSHS Fiscal Claims
DEPARTMENT OF STATE HEALTH SERVICES
1100 W 49th St (RBB)
PO Box 149347
Austin TX 78756
United States

Fax: 512/458-7442
Email: invoices@dshs.texas.gov

Purchaser: Breest, Maria Ana

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
1-1	Innovative Storage Designs 3-Tier File Organizer, Clear. Office use.	100-34	2.00	EA	21.52000	\$43.04	04/27/2023
Schedule Total						\$43.04	
Item Total for Line 1						\$43.04	
2-1	TUL Discbound Student Notebook, 3-subject narrow ruled 150 pages (75 sheets), cover, gray. Office use.	785-73	5.00	EA	15.39000	\$76.95	04/27/2023
Schedule Total						\$76.95	
Item Total for Line 2						\$76.95	
Total PO Amount						\$119.99	

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

M. B. West CTCD, CTOM

05/03/2023