Health and Human Services Commission

Purchase Order

Dispatch via Print

Extended Amt Due Date

Payment Tern Net 30	ns Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-0000315898
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			Revision Page
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:	5035 - Rusk:805 N Dickinson Dr HEALTH & HUMAN SERVICES COMMISSION 805 N Dickinson Dr PO Box 318 Rusk TX 75785 United States
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States		Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States
			Fax: Email:	254/562-1894 718Accounting@hhs.texas.gov
			Purchaser:	Vasquez lii,Richard

Quantity UOM

PO Price

Line-Sch

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

Inventory Item ID - Line Description

DELIVERY: 10 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

Class/Item

AGENCY CONTACT:

*PLEASE HAVE VENDORS SEND INVOICES VIA EMAIL TO 718Accounting@hhsc.state.tx.us**

Ship To: Cheryll Pope Email: Cheryll.Pope@hhs.texas.gov Contact Phone: 903-683-7682

Requester: Emma Hernandez Requester Email: EmmaO.Hernandez@hhs.texas.gov Requester Phone: 903.683.7100

HHSC BUYER: Richard Vasquez richard.vasqueziii@hhs.texas.gov 512-639-7327

QUOTE 17504

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

SP/E

Health and Human Services Commission

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Payment Te		Ship V			<u> </u>	HHSTX-3-0	000315808
	Prepaid & Allow by informal bid, Invitation for Offer, or Req		al; all	Date	ise Order Revisior		Page
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.			04/28/2 Ship To	5035 - Ru HEALTH	2 5035 - Rusk:805 N Dickinson Dr HEALTH & HUMAN SERVICES COMMISSION 805 N Dickinson Dr		
				PO Box 3 Rusk TX	PO Box 318 Rusk TX 75785 United States		
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States			Bill To:		& HUMAN SERVICES Co uite Dr 132 76667	OMMISSION
				Fa: En		894 nting@hhs.texas.gov	
				Purcha		lii,Richard	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Requisition	#0000220964						
1-1	(GOODS) Expansion Folder; Smead Classification File Folder, 2 Dividers, 2" Expansion, 2/5-Cut Tab, Letter Size, Manila, 10 per Box (14000)	615-41	2.00	EA	34.99000	\$69.98	05/12/2023
					Schedule Total	\$69.98	
document wi	th detailed information attached.			J	tem Total for Line 1	\$69.98	
2-1	(GOODS) Key Cabinet; KYODOLED Key Cabinet Wall Mount,Locking Key Organizer,Key Lock Box with Key,Key Management,20 Key Hooks & Tags Key Lab,7.8"x6.3"x3.14" Black	425-50	4.00	EA	19.99000	\$79.96	05/12/2023
					Schedule Total	\$79.96	
document wi	th detailed description attached.			1	tem Total for Line 2	\$79.96	
3-1	(GOODS) Key Tags; Uniclife 2 Inch Tough Plastic Key Tags in 9 Assorted Colors Item Identifiers Markers with Blank Paper Labels Protective Plastic Films and Split Rings, 100 Pack	615-86	1.00	EA	12.99000	\$12.99	05/12/2023
					Schedule Total	\$12.99	
document wi	th detailed information attached.			1	tem Total for Line 3	\$12.99	
					Total PO Amount	\$162.93	

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Purchase Order

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Payment Terr Net 30	ns Freight Terms Prepaid & Allow	Ship Vi a BEST W		Purchase Order	ł	HHSTX-3-00	00315898
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				Date 04/28/23	Revision		Page 3
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Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 United States			Bill To:	Invoice - DADS HEALTH & HUM. 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States	AN SERVICES CO	MMISSION
				Fax: Email:	254/562-1894 718Accounting@hl	hs.texas.gov	
				Purchaser:	Vasquez lii,Richa		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date

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	
Rectal Varger of CTCD, CTCM	
	<u>05/01/2023</u>