Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment To Net 30	Freight Terms Prepaid & Allow	Ship V BEST		Purchase Order	HHSTX-3-000031601
specification	d by informal bid, Invitation for Offer, or Re ns, terms, and conditions set forth in the adv	ertisement and ve	Date 05/01/23	Revision Pag	
guarantees g requirement All shipmer	responses become a part of this numbered p goods or services delivered meet or exceed n ts. nts, shipping papers, invoices, and corresp urchase Order Number.	numbered purchas	e order	Ship To:	6433 - Carlsbad:11640 US Hwy 87 N HEALTH & HUMAN SERVICES COMMISSION 11640 US Hwy 87 N 11640 N US Hwy 87 Carlsbad TX 76934 United States
Vendor:	1832646668 9 IDM PRODUCTS LLC 10460 MARKISON RD DALLAS TX 752381650 United States		Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 2501 Maple St PO Box 451 Abilene TX 79602 United States	
				Fax: Email:	325/795-3807 710Accounting@hhsc.state.tx.us
Line-Sch	Inventory Item ID - Line Description	Class/Item	Ouantity	Purchaser: UOM	Breest,Maria Ana PO Price Extended Amt Due Date

CP/X - TXMAS Contract 455/80 SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO. FREIGHT: F.O.B. Destination Freight Prepaid Allowed DELIVERY: 3 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. ** VENDORS SEND INVOICES VIA EMAIL TO ** 710Accounting@hhs.texas.gov

***PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO ***

AGENCY CONTACT:

Agency Contact: Lara Woods Agency Contact phone: 325-465-2202 Agency Contact email: Lara.Woods@hhs.texas.gov

Contract Manager: Ida Montez Contract manager phone: 325-465-2203 Contract manager email: ida.montez@hhs.texas.gov

HHSC BUYER: Ana Breest, CTCD, CTCM 512-406-2679 Ana.breest@hhs.texas.gov

Dealer VID: 18326466689 Dealer: IDM Products, LLC Contact Name: Gerald Grimes Email: gerald@idmproducts.com Phone: (972) 345-3952

PURCHASING METHOD: CP/X Procurement methods were evaluated, and the best value is provided using the TXMAS contract. Txmas Contract: TXMAS-18-51V08 Term:7.2.18/6.30.23 Smartbuy PO: 23146892 REQUIREMENTS/LIMITATIONS: This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY23 Funding. Invoice per 34 TAC §20.487, amended effective May 1, 2023

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Net 30	Prepaid & Allow	BEST		Purchase Order	r	HHSTX-3-0	000316017
specification	by informal bid, Invitation for Offer, or Res, terms, and conditions set forth in the adve	ertisement and ve	endor's	Date 05/01/23	Revision		Pag
guarantees go requirements All shipmen	responses become a part of this numbered p oods or services delivered meet or exceed n s. ts, shipping papers, invoices, and corresp rchase Order Number.	Ship To:	6433 - Carlsbad:11640 US Hwy 87 N HEALTH & HUMAN SERVICES COMMISSIC 11640 US Hwy 87 N 11640 N US Hwy 87 Carlsbad TX 76934 United States				
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				Fax: Email:	325/795-3807 710Accounting	g@hhsc.state.tx.us	
<u></u>			0	Purchaser:	Breest,Maria		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Requisition: smartbuy	: #230528						
-1	Laminator Accessories; Type: Desktop Laminator,	445-80	1.00	EA	115.09000	\$115.09	05/01/2023
				Sch	edule Total	\$115.09	
				Item Total	l for Line 1	\$115.09	

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	
MBRUNT CTCD, CTCM	
NUMUNI CICU,CICM	05/02/2023

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