

# Health and Human Services Commission

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000316172</b>
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.			<b>Date</b> 05/03/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 1
			<b>Ship To:</b> 4551 - Austin:4301 N Lamar Blvd HEALTH & HUMAN SERVICES COMMISSION 4301 N Lamar Blvd Austin TX 78751 United States

**Vendor:** 1411938567 3  
IDENTISYS INCORPORATED  
PO BOX 1086  
MINNETONKA MN 553450086  
United States

**Bill To:** Invoice - DADS  
HEALTH & HUMAN SERVICES COMMISSION  
4001 Highway 36 South  
Brenham TX 77833  
United States

**Fax:** 979/277-1865  
**Email:** 712Accounting@hhs.texas.gov

**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: 21 Days After Receipt of PO

Warehouse: Please deliver to bldg. 800

PRIMARY POINT OF CONTACT  
Name: Gabriele Dangerfield  
Email: Gabriele.Dangerfield@hhs.texas.gov  
Phone: 512-419-2663

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

Vendor:  
Identisys Incorporated  
Name: Andrew Johnson  
Phone: 952-294-1216  
Email: Andrew\_Johnson@identisys.com

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 222740

1-1	YMCKT-KT, Colored Ribbon, R010 Ribbon	207-72	2.00	EA	150.00000	\$300.00	05/22/2023
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**Schedule Total**                     \$300.00

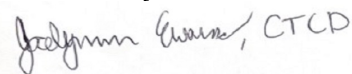
**Item Total for Line 1**                     \$300.00

**Total PO Amount**                     \$300.00

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.

<b>Authorized By</b> 	<b>05/03/2023</b>
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