

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-3-0000316179
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 05/03/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
			Ship To: 5724 - San Angelo;622 S Oakes St DEPARTMENT OF STATE HEALTH SERVICES 622 S Oakes St Ste H San Angelo TX 76903 United States

Vendor: 1471093822 7
HUSEMAN LOGISTICS INC
DBA WELCH TRANSFER & STORAGE
203 W WASHINGTON DR
SAN ANGELO TX 769036843
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: Coleman,Rosetta V 512/406-2677

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY23 funding
SP/E

Requisition 0000229416 Pricing per Quote 220.00

PO Service Dates 05/3/2023 to 08-31-2023

Attached Terms and Conditions apply to this Purchase Order.
This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2023 are automatically canceled

Vendor contact
147093822
Huseman Logistics Inc DBA: Welch Transfer Storage

Name: Liz Selby
Phone number: 325-655-3751
Email address: LIZ@WELCHTRANSFER.COM

Agency contact:
Name: Shantique Rojas
Phone number: 432-957-6520
Email address: Shantique.Rojas@dshs.texas.gov

Facility : 574 622 S Oaks St Suite H, San Angelo TX 76903

PCS contact: Rosetta Coleman, CTCM, CTCD
Phone number: (512)-406-2677
Email address: rosetta.coleman03@hhs.texas.gov

1-1	REMOVAL OF MODULAR FURNITURE	962-46	1.00	JOB	220.00000	\$220.00	05/03/2023
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Schedule Total \$220.00

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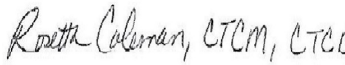
Item Total for Line 1 _____ \$220.00

Total PO Amount \$220.00

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.

Authorized By 	05/03/2023
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