### **Health and Human Services Commission**

#### **Purchase Order**

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	STX-3-0000316213	
specifications, terms	rmal bid, Invitation for Offer, or la, and conditions set forth in the ad	dvertisement and vendor's	<b>Date</b> 05/03/23	Revision	Page 1	
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.			Ship To:	Ship To: 3137 - Tyler:3303 Mineola Hwy HEALTH & HUMAN SERVICES COMMISSIO 3303 Mineola Hwy		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				PO Box 5200 Tyler TX 75702 United States		
** * 126	1027105.0			HHIGG B : 0	4.77 1	

**Vendor:** 1391837105 8

4IMPRINT INC 25303 NETWORK PL CHICAGO IL 606731253

**United States** 

Bill To: Invoice-HHSC; Region 04 Headqu

HEALTH & HUMAN SERVICES COMMISSION

302 E Rieck Rd Tyler TX 75703 United States

**Fax:** 903 534 8487

Email: paula.thurman@hhsc.state.tx.us

Purchaser: Breest, Maria Ana

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

SP/E - Spot Purchase Up to \$10,000.00 936-18

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

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

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

 ${\tt SEND~INVOICES~TO:}~reg04\_admin\_services@hhs.texas.gov$ 

Lead Contact: Paula Thurman

Lead email: paula.thurman@hhs.texas.gov

Lead phone: 936-509-5104

HHSC BUYER:

Ana Breest, CTCD, CTCM 512-406-2679

ana.breest@hhs.texas.gov

Please follow the Texas Comptroller's Invoicing standards as seen below.

Include PO Number on invoices, bills, receipts, bill lading, packing slips, and back order.

(a) To receive payment, a contractor must submit an invoice to the State Agency receiving the goods or services.

The invoice should include, but is not limited to including:

- (1) the contractor's mailing and e-mail (if applicable) address;
- (2) the contractor's telephone number;
- (3) the name and telephone number of a person designated by the contractor to answer questions regarding the invoice;
- (4) the state agency's name, agency number, delivery address;
- (5) the state agency's purchase order number, if applicable;
- (6) the contract number or other reference number, if applicable;
- (7) a valid Texas identification number (TIN) issued by the Comptroller;
- (8) a description of the goods or services, in sufficient detail to identify the order which relates to the invoice;
- (9) unit numbers corresponding to the amount of the invoice;
- (10) if submitting an invoice after receiving an assignment of a contract, the TIN of the original contractor and the TIN of the successor vendor;
- (11) other relevant information supporting and explaining the payment requested

VID: 1391837105

4Imprint

Contact Name: Laura Schmitz Phone: 877-446-7746 X 8519 Ischmitz@4imprint.com Quote: # 24841328

PURCHASING METHOD: SP/E

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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.  All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			<b>Date</b> 05/03/23	Revision		
			Ship To:	3137 - Tyler:3303 Mineola Hwy HEALTH & HUMAN SERVICES COMMISSION 3303 Mineola Hwy PO Box 5200 Tyler TX 75702 United States		
Vendor: 139	01837105 8		Rill To:	Invoice-HHSC: Region 04 Heada	11	

4IMPRINT INC 25303 NETWORK PL CHICAGO IL 606731253 **United States** 

HEALTH & HUMAN SERVICES COMMISSION

302 E Rieck Rd Tyler TX 75703 United States

903 534 8487 Fax:

Email: paula.thurman@hhsc.state.tx.us

Purchaser: Breest, Maria Ana

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

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.

	34 TAC §20.487, amended effective Ma : 0000231649	y 1, 2023		,			
1-1	CrownLux Performance Plaited Tipped Polo - Men's, 1 - Large: Graphite, White - Embroidery	936-18	1.00	EA	37.50000	\$37.50	05/12/2023
					Schedule Total	\$37.50	
PLEASE SE	EE ATTACHED QUOTE.				Item Total for Line 1	\$37.50	
2-1	Boston Performance Polo - Men's, Item #137451-M, 1 - Large: Raspberry Ice,Raspberry Ice, 1 - Large: Red,Red - Embroidery	936-18	2.00	EA	35.50000	\$71.00	05/12/2023
					Schedule Total	\$71.00	
					Item Total for Line 2	\$71.00	
3-1	Silk Touch Sport Shirt - Ladies' - Embroidered, Item# 7540-L-E, 1-XL: Maroon,Maroon, 1-XL: Ultramarine Blue,Ultramarine Blue, 1-XL, 1-XL, Black,Black, Embroidery	936-18	3.00	EA	24.25000	\$72.75	05/12/2023
					Schedule Total	\$72.75	
					Item Total for Line 3	\$72.75	
4-1	Freight	962-86	1.00	LOT	23.05000	\$23.05	05/12/2023

### **Health and Human Services Commission**

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Payment Te Net 30	rms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-	3-0000316213
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Vendor:	1391837105 8 4IMPRINT INC 25303 NETWORK PL CHICAGO IL 606731253		Bill To:	Invoice-HHSC; Region 04 Heac HEALTH & HUMAN SERVIC 302 E Rieck Rd Tyler TX 75703	1

Fax: 903 534 8487

Email: paula.thurman@hhsc.state.tx.us

United States

Purchaser: Breest, Maria Ana **Inventory Item ID - Line Description** Class/Item Quantity Extended Amt Line-Sch **UOM** PO Price **Due Date** \$23.05 Schedule Total \$23.05 Item Total for Line 4 Total PO Amount \$204.30

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.

**United States** 

Authorized By

MBHUST CTCD, CTCM

05/03/2023