Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terr	ms Freight Terms	Ship Via			
Net 30	N/A, Service, Pick up, etc.	NONE	Purchase Order	HHSTX	X-3-0000316635
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			Date 05/08/23	Revision	Page 1
guarantees goo requirements. All shipments	sponses become a part of this numbered pur ods or services delivered meet or exceed nur s, shipping papers, invoices, and correspondence Order Number.	mbered purchase order	Ship To:	6433 - Carlsbad:11640 US HV HEALTH & HUMAN SERVI 11640 US Hwy 87 N 11640 N US Hwy 87 Carlsbad TX 76934 United States	
Vendor:	1833715866 3 BONNER ORAL SURGERY PLLC 4 HOSPITAL DR ABILENE TX 796065289 United States		Bill To:	Invoice - DADS HEALTH & HUMAN SERVI 2501 Maple St PO Box 451 Abilene TX 79602 United States	CES COMMISSION
			Fax: Email:	325/795-3807 710Accounting@hhsc.state.tx.	us

Line-SchInventory Item ID - Line DescriptionClass/ItemQuantityUOMPO PriceExtended AmtDue Date

FY23 Funding

EX/0 Legal Cite 2155.144 (b)(b-1)(2); Client Purchase

Awarded in accordance with Informal IFB Solicitation #0000232379

Requisition 0000232379 PO Amount: \$15,000.00; Must not exceed: \$25,000.00

Rates: In accordance with Vendors Response to awarded IFB Solicitation #0000232379;

See Contractor's response to Pricing Sheet and Contractor's Fee Schedule

PO Service Dates: 05/08/2023 to 08/31/2023 no renewals

Attached Terms and Conditions apply to this Contract 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 and/or services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services actually ordered and received by the agency. Any funds not utilized by 08/31/2023 are automatically canceled.

Client Services as needed: Oral Surgery Services In accordance with SOW IFB Solicitation 0000232379

For Agency/Facility: HHSC/San Angelo State Supported Living Center (SGSSLC)

Vendor Contact: VID 1833715866 Megan Provost 325-437-3100 megan@bonneroralsurgery.com

Contract Manager Contact: Ida Montez, CTCM 325-465-2203 ida.montez@hhs.texas.gov

SME Contact: Elizabeth Samaniego 325-465-4391 elizabeth.samaniego@hhs.texas.gov

PCS Contact: Cindy Atchley, CTCD

Health and Human Services Commission

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Freight Terms

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If advanting	N/A, Service, Pick up, etc.	Ship Via NONE	Purchase Order	Н	HSTX-3-0000316635
specification	d by informal bid, Invitation for Offer, or Request, terms, and conditions set forth in the adver	tisement and vendor's	Date 05/08/23	Revision	Page 2
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:	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:	1833715866 3 BONNER ORAL SURGERY PLLC 4 HOSPITAL DR ABILENE TX 796065289 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@hhs	sc.state.tx.us
			Purchaser:	Atchley,Cindy Jear	432/263-9617
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt Due Date
432-263-96 cindy.atchl	617 ey@hhs.texas.gov				
1-1	FY23 Client Services as needed; Oral Surgery for individuals at the SGSSLC DA-1 SGSSLC; Informal Solicitation 0000232379; Term 5/8/2023-08/31/2023 no renewals; REQ 232379	948-28 1.00	LOT 15	5000.00000	\$15,000.00 05/08/2023
1-1	Surgery for individuals at the SGSSLC DA-1 SGSSLC; Informal Solicitation 0000232379; Term 5/8/2023-08/31/2023	948-28 1.00		5000.00000 dule Total	
VENDORS BILL TO IN Bill to: 450 Abilene Stat Attn: Accou PO Box 451	Surgery for individuals at the SGSSLC DA-1 SGSSLC; Informal Solicitation 0000232379; Term 5/8/2023-08/31/2023 no renewals; REQ 232379 SEND INVOICES VIA EMAIL TO: 710Acc NFORMATION 7 te Supported Living Center ants Payable 1 Abilene, TX 79604				
VENDORS BILL TO IN Bill to: 450 Abilene Stat Attn: Accou PO Box 451	Surgery for individuals at the SGSSLC DA-1 SGSSLC; Informal Solicitation 0000232379; Term 5/8/2023-08/31/2023 no renewals; REQ 232379 SEND INVOICES VIA EMAIL TO: 710Acc NFORMATION 7 te Supported Living Center unts Payable		Sche		\$15,000.00

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

Cindy atchley, CTCD

05/08/2023