Health and Human Services Commission

Purchase Order

Dispatch via Print

| Payment Terms Net 30 | Freight Terms Prepaid & Allow | Ship Via BEST WAY | Purchase Order | ннѕт | X-3-0000316682 |
|--|---|-----------------------------|---|------|----------------|
| 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 | | |
| guarantees goods or requirements. | services delivered meet or exceed ping papers, invoices, and corre | numbered purchase order | Ship To: 2099 - Austin:909 W 45th St (DHB) HEALTH & HUMAN SERVICES COMMISSION 909 W 45th St (DHB) Bldg 2 Austin TX 78751 United States | | |

Vendor: 1391837105 8

4IMPRINT INC 25303 NETWORK PL CHICAGO IL 606731253

United States

Bill To: Invoice-HHSC Accounting

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

Purchaser: Klekar, Dorian Nogueira

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

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

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

DELIVERY: 14 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

AGENCY CONTACT: Lisa Kemp +1 (512) 206-5326

lisa.kemp@hhs.texas.gov

Ship to Attn: Lisa Kemp

HHSC BUYER: Dorian Klekar 512-776-2991

dorian.klekar@hhs.texas.gov

VENDOR: 4IMPRINT INC Kelly Sorenson 877-446-7746 ext. 8554 ksorenson@4imprint.com

QUOTE 24935533

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 0000234865

1-1 200-10 10.00 EA 16.07000 \$160.70 05/22/2023

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| | | | I | United States | | |

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Email: HHSC_AP@hhsc.state.tx.us

Klekar, Dorian Nogueira Purchaser: **Inventory Item ID - Line Description** Class/Item Quantity UOM PO Price Line-Sch **Extended Amt** Due Date 105474-M-E Cotton Polo- Embroideredsmall Schedule Total \$160.70 Item Total for Line 1 \$160.70 2-1 200-10 10.00 EA 16.07000 \$160.70 05/22/2023 105474-M-E Cotton Polo- Embroideredmed Schedule Total \$160.70 Item Total for Line 2 \$160.70 16.07000 3-1 200-10 10.00 EA \$160.70 05/22/2023 105474-M-E Cotton Polo- Embroidered-Schedule Total \$160.70 Item Total for Line 3 \$160.70 200-10 10.00 EA 16.07000 \$160.70 05/22/2023 4-1 105474-M-E Cotton Polo- Embroidered-Schedule Total ____ \$160.70 Item Total for Line 4 \$160.70 5-1 200-10 10.00 EA 16.07000 \$160.70 05/22/2023 105474-M-E Cotton Polo- Embroidered-XXI. Schedule Total \$160.70 Item Total for Line 5 \$160.70 200-10 10.00 EA 16.07000 \$160.70 05/22/2023 6-1 105474-M-E Cotton Polo- Embroidered-

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| specification | 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. | | | Revision | Page 3 |
| guarantees go requirements All shipmen | | | | Ship To: 2099 - Austin:909 W 45th St (DHB HEALTH & HUMAN SERVICES G 909 W 45th St (DHB) Bldg 2 Austin TX 78751 United States | |
| Vendor: | 1391837105 8 4IMPRINT INC 25303 NETWORK PL CHICAGO IL 606731253 | | Bill To: | Invoice-HHSC Accounting HEALTH & HUMAN SERVICE 4601 W Guadalupe St Austin TX 78751 | ES COMMISSION |

Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

United States

Klekar, Dorian Nogueira Purchaser: **Inventory Item ID - Line Description** Class/Item Quantity Line-Sch **UOM** PO Price Extended Amt **Due Date** 3XL Schedule Total \$160.70 Item Total for Line 6 \$160.70 1.00 EA 45.36000 7-1 962-89 \$45.36 05/22/2023 Freight-shipping \$45.36 Schedule Total Item Total for Line 7 \$45.36 8-1 860-20 1.00 LOT -96.42000 (\$96.42) 05/22/2023 Coupon Code \$-96.42 Schedule Total \$-96.42 Item Total for Line 8 \$913.14 Total PO Amount

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 |
|---------------|
| |
| |

Derivan Klekan

05/08/2023