#### **Purchase Order**

**Dispatch via Print** 

specifications, terms, a conforming responses l guarantees goods or ser	Prepaid & Allow al bid, Invitation for Offer, or Re ad conditions set forth in the adv		Purchase Order Date	Revision	HSTX-3-0000317321 Page	
guarantees goods or ser	accors a most of this numbered m		05/15/23		1	
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:	3137 - Tyler:3303 Mineola Hwy HEALTH & HUMAN SERVICES COMMISSION 3303 Mineola Hwy PO Box 5200 Tyler TX 75702 United States		
4IMP 25303 CHIC	37105 8 RINT INC NETWORK PL AGO IL 606731253 <b>d States</b>		Bill To:	Invoice-HHSC; Reg HEALTH & HUM4 302 E Rieck Rd Tyler TX 75703 United States	gion 04 Headqu AN SERVICES COMMISSION	
			Fax: Email:	903 534 8487 paula.thurman@hhs	sc.state.tx.us	
			Purchaser:	Breest,Maria Ana		
Line-Sch Inventor	y Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt Due Date	
SHIP TO LOCATION Health and Human S 3303 MINEOLA HWY Attention: Paula Thur BILL TO LOCATION Health and Human S 302 E. RIECK ROAD	ervices Commission /., TYLER, TX 75702 man / 903-509-5104 / paula.tl CODE: 3135 ervices Commission	hurman@hhs.texas.gov				
	): reg04_admin_services@hh	C				
	ranza.McMeans@hhs.texas.g					
	3 HHSC - System Support Se					
Include PO Number of (a) To receive paymer The invoice should in (1) the contractor's m (2) the contractor's te (3) the name and tele	phone number of a person de name, agency number, deliv	lading, packing slips, and bac an invoice to the State Agency luding: e) address; esignated by the contractor to	y receiving the goods			

(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.

Notes to Purchaser:

Add PCC code to PO copy, if any Please add Requisition number and SmartBuy Number on PO copy

Employee Uniform Shirts. SP/E - Spot Purchase Up to \$10,000.00 936-18

#### **Purchase Order**

Payment Terms	Freight Terms	Ship Via			Dispatch via	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order		HHSTX-3-0000317	321
specifications, terms,	mal bid, Invitation for Offer, or and conditions set forth in the a	dvertisement and vendor's	<b>Date</b> 05/15/23	Revision		Pag
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:	Ship To: 3137 - Tyler:3303 Mineola Hw HEALTH & HUMAN SERVIC 3303 Mineola Hwy PO Box 5200 Tyler TX 75702 United States		N
4IM 253 CHI	1837105 8 PRINT INC 03 NETWORK PL ICAGO IL 606731253 <b>ted States</b>		Bill To:		Region 04 Headqu MAN SERVICES COMMISSIC	N
			Fax: Email:	903 534 8487 paula.thurman@ł	nhsc.state.tx.us	
			Purchaser:	Breest,Maria Ar		
Line-Sch Invent	ory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt Due Dat	e
Lead Contact Phon SHIP TO LOCATIC Health and Human 3303 MINEOLA HV Attention: Darin Ad BILL TO LOCATIO Health and Human 302 E. RIECK ROA	I: paula.thurman@hhs.texas. e: 903-509-5104 DN CODE: 3137 Services Commission VY., TYLER, TX 75702 ams / 903-533-4258 / Darin.A	dams@hhs.texas.gov				
SUPER USER: ES	peranza.McMeans@hhs.texas	s.gov / 903-509-5131				
	peranza.McMeans@hhs.texas 13 HHSC - System Support \$	0				

### **Purchase Order**

		i ui	Chase	Oldel		Diena	tch via Prin
Payment Tern Net 30	ms Freight Terms Prepaid & Allow	Ship Via BEST W		Burchass Order		HHSTX-3-0	
If advertised b	y informal bid, Invitation for Offer, or Rec	quest for Proposal;	all	Purchase Order Date	Revision	111017-3-0	Pag
conforming re guarantees goo requirements. All shipments	terms, and conditions set forth in the adve sponses become a part of this numbered pu ods or services delivered meet or exceed nu s, shipping papers, invoices, and corresp	urchase order. Con umbered purchase	ntractor order	05/15/23 Ship To:	3137 - Tyler:330 HEALTH & HUI 3303 Mineola Hy PO Box 5200	MAN SERVICES CO	OMMISSION
vith our Puro	chase Order Number.				Tyler TX 75702 United States		
Vendor:	1391837105 8 4IMPRINT INC 25303 NETWORK PL CHICAGO IL 606731253 United States			Bill To:		Region 04 Headqu MAN SERVICES CO	OMMISSION
				Fax: Email:	903 534 8487 paula.thurman@ł	nhsc.state.tx.us	
		~		Purchaser:	Breest,Maria Ar		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
512-406-267	CTCD, CTCM 9 hhs.texas.gov						
Imprint /endor Conta /endor Telep	FORMATION: act: Laura Schmitz phone: 877-446-7746 X:8519 I: Ischmitz@4imprint.com 5307						
Not to Excee REQUIREME This PO is co nvoice per 3	IG METHOD: SP/E d \$10,000.00 ENTS/LIMITATIONS: ontingent upon the continued availabilit 4 TAC §20.487, amended effective Ma 0000233788		priations by	r the Texas Legislatur	e. FY2023 fundin	g.	
	Dry-Mesh Hi-Performance Polo - Men's Embroidered, 1-Medium: Royal Blue, Steel Gray, 4-Large: Royal Blue, Steel Gray, 2-XL: Royal Blue, Steel Gray, 2- XXL: Royal Blue, Steel Gray, 1-XXXL: Royal Blue, Gray Steel, Item# 122078- M-E	936-18	10.00	EA	23.51000	\$235.10	05/21/2023
				Sche	dule Total	\$235.10	
PLEASE SEE	ATTACHED QUOTE.			Item Total	for Line 1	\$235.10	
2-1	<b>P</b> 11	962-86	1.00	LOT	23.50000	\$23.50	05/21/2023
	Freight			Sche	dule Total	\$23.50	
					for Line 2		
				item i utai		φ20.00	

### **Purchase Order**

					rcnase			
tch via Pri					ia	Ship V	reight Terms	ayment Terms
	HHSTX-3-0		urchase Order			BEST	repaid & Allow	let 30
Pa		Revision	<b>ate</b> 5/15/23		ndor's	rtisement and ve	id, Invitation for Offer, or Req conditions set forth in the adve ome a part of this numbered pu	pecifications, terms
OMMISSION	MAN SERVICES CO	3137 - Tyler:330 HEALTH & HUN 3303 Mineola Hw PO Box 5200 Tyler TX 75702 United States	hip To:		e order	mbered purchas	es delivered meet or exceed nu apers, invoices, and correspo	uarantees goods or equirements.
OMMISSION	egion 04 Headqu MAN SERVICES CC	Invoice-HHSC; R HEALTH & HUN 302 E Rieck Rd Tyler TX 75703 United States	ill To:				05 8 T INC TWORK PL O IL 606731253 ates	41N 255 CH
	hsc.state.tx.us	903 534 8487 paula.thurman@h	Fax: Email:					
Due Date	Extended Amt	Breest,Maria An PO Price	urchaser:	UC	Quantity	Class/Item	tem ID - Line Description	ine-Sch Inver
			M				tem ID - Eme Description	
05/21/2023	\$141.06	23.51000		EA	6.00	936-18	i Performance Polo - Ladies' ed, 1-Small: Royal Blue, 2-Medium: Royal Blue, Steel ge: Royal Blue, Steel Gray, al Blue, Steel Gray, Item 3	- Emt Steel Gray,
	\$141.06	edule Total	Sche					
	\$141.06	for Line 3	Item Total f					
05/21/2023	\$132.36	22.06000		EA	6.00	936-18	UV Performance Polo - broidered, 1-Small: aphite, 2-Medium: Graphite, Large: Graphite, Graphite, 2- ite, Graphite, Item# 145248-	Ladie Grapl Grapl
	\$132.36	edule Total	Sche					
		for Line 4						
05/21/2023	\$220.60	22.06000		EA	10.00	936-18	UV Performance Polo - roidered, 1-Medium: aphite, 4-Large: Graphite, XL: Graphite, Graphite, 2- ite, Graphite, 1-XXXL: aphite, Item# 145248-M-E	Men's Graph Graph XXL:
	\$220.60	edule Total	Sche					
	\$220.60	for Line 5	Item Total f					
05/21/2023	\$35.00	35.00000	Γ	LC	1.00	962-33		-1 Tape
	\$35.00	edule Total	Sche					

#### **Purchase Order**

Payment Terms Net 30	Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-3	-0000317321
pecifications, terms,	mal bid, Invitation for Offer, or Reque , and conditions set forth in the adverti	sement and vendor's	<b>Date</b> 05/15/23	Revision	<b>Page</b> 5
uarantees goods or s equirements.	s become a part of this numbered purc services delivered meet or exceed num ping papers, invoices, and correspon Order Number.	bered purchase order	Ship To:	3137 - Tyler:3303 Mineola Hwy HEALTH & HUMAN SERVICE 3303 Mineola Hwy PO Box 5200 Tyler TX 75702 United States	S COMMISSION
4IM 253 CHI	1837105 8 IPRINT INC 03 NETWORK PL ICAGO IL 606731253 <b>ited States</b>		Bill To:	Invoice-HHSC; Region 04 Headqu HEALTH & HUMAN SERVICES COMMISSION 302 E Rieck Rd Tyler TX 75703 United States	
			Fax: Email:	903 534 8487 paula.thurman@hhsc.state.tx.us	
			Purchaser:	Breest,Maria Ana	
ine-Sch Invent	tory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extended A	mt Due Date

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.

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	Authorized By	
	MBrust CTCD, CTCM	
		05/16/2023