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

#### **Purchase Order**

#### TX SmartBuy PO ID

**Dispatch via Print** 

Payment Terms Net 30	Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-3-000	00317362	
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			<b>Date</b> 05/15/23	Revision Page		
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: 4547 - Wichita Falls:6515 Kemp Blv HEALTH & HUMAN SERVICES COMMISSION 6515 Kemp Blvd			
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.						
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Vendor: 1561558062 6

BOB BARKER COMPANY INC

PO BOX 429

FUQUAY VARINA NC 275260429

**United States** 

Bill To: Terrell SH Whse

HEALTH & HUMAN SERVICES COMMISSION

1200 E Brin PO Box 70 Terrell TX 75160 United States

Email: DSHS.TSHBusinessOffice@dshs.texas.gov

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

FREIGHT: F.O.B Destination Freight Prepaid and 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 when the Warehouse is closed.

Please call Agency Delivery Contact to schedule delivery 24 hours prior to arrival.

AGENCY DELIVERY CONTACT: Whse Supvr Stacy Ward Ph: 940-689-5311 stacy.ward@hhs.texas.gov

Reg Mgr Charles Barrett

HHSC BUYER: Kourtney Viktora

1-800-334-9880

(512)776-2692 Kourtney.viktora@hhs.texas.gov

VENDOR: Brock Frew

customerservicecentral@bobbarker.com

FY23

OMNIA GPO and HHS Contract#: HHS000840200001

Contract# WA00034777

October 5, 2022 through October 4, 2024

PURCHASING METHOD: EX-0

Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

Requisition MIM2317644 Line 4, 5, 6, 7, 8, 10, 11, 90

1-1 652-42-00003-0 652-42 5.00 CS 36.16000 \$180.80 05/29/2023 HAIR GRS BERGAMOT 4OZ 12/CS

BOBBARKER 024

## **Health and Human Services Commission**

### **Purchase Order**

### TX SmartBuy PO ID

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via		LILICTY 2	0000247200	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HH51X-3-	0000317362	
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			<b>Date</b> 05/15/23	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.			Ship To:	4547 - Wichita Falls:6515 Kemp Blv HEALTH & HUMAN SERVICES COMMISSI 6515 Kemp Blvd		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				PO Box 300 Wichita Falls TX 76308 United States		
			_			

**Vendor:** 1561558062 6

BOB BARKER COMPANY INC

PO BOX 429

FUQUAY VARINA NC 275260429

**United States** 

Bill To: Terrell SH Whse

HEALTH & HUMAN SERVICES COMMISSION

1200 E Brin PO Box 70 Terrell TX 75160 United States

Email: DSHS.TSHBusinessOffice@dshs.texas.gov

Viktora, Kourtney Chrissanne Purchaser: Inventory Item ID - Line Description Class/Item Quantity UOM Line-Sch PO Price Extended Amt Due Date Schedule Total \$180.80 Item Total for Line 1 \$180.80 200-10-00000-4 200-10 8.26000 2-1 48.00 EA \$396.48 05/29/2023 SWEAT SHIRT MED GRAY SSGY-M BOBBARKER \$396.48 Schedule Total Item Total for Line 2 \$396.48 108.00 EA 3-1 200-10-00001-1 200-10 8.26000 \$892.08 05/29/2023 SWEAT PANT SML GRAY SPGY-S BOBBARKER Schedule Total \_\_\_\_ \$892.08 Item Total for Line 3 \$892.08 200-10-00001-3 200-10 144.00 EA 4-1 8.26000 \$1,189.44 05/29/2023 SWEAT PANT LGE GRAY SPGY-L **BOBBARKER** Schedule Total \$1,189.44 Item Total for Line 4 \$1,189.44 5-1 200-10-00001-4 200-10 324.00 EA 8.26000 \$2,676.24 05/29/2023 SWEAT PANT XL GRAY SPGY-XL BOBBARKER Schedule Total \$2,676.24 Item Total for Line 5 \$2,676.24 9.49000 6-1 200-10-00001-5 200-10 72.00 EA \$683.28 05/29/2023 SWEAT PANT 2XL GRAY SPGY-2XL **BOBBARKER** 

# **Health and Human Services Commission**

### **Purchase Order**

## TX SmartBuy PO ID

**Dispatch via Print** 

Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	ннѕтх	(-3-0000317362
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> 05/15/23	Revision	Page 3
			Ship To:  4547 - Wichita Falls:6515 Kemp Blv HEALTH & HUMAN SERVICES COMMISSI 6515 Kemp Blvd PO Box 300 Wichita Falls TX 76308 United States		
Vendor:	1561558062 6 BOB BARKER COMPANY INC PO BOX 429 FUQUAY VARINA NC 275260429 United States		Bill To:	Terrell SH Whse HEALTH & HUMAN SERVI 1200 E Brin PO Box 70 Terrell TX 75160 United States	ICES COMMISSION

Email: DSHS.TSHBusinessOffice@dshs.texas.gov

				Purc	haser: Viktora,Kou	rtney Chrissanne	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
					Schedule Total	\$683.28	
					Item Total for Line 6	\$683.28	
7-1	200-45-20010-0 PONCHO RAINWEAR ONE SZ BOBBARKER 042	200-45	16.00	DZ	34.43000	\$550.88	05/29/2023
					Schedule Total	\$550.88	
					Item Total for Line 7	\$550.88	
8-1	201-87-25532-6 BRIEF MEN LGE 38-40 PLY/CTN BOBBARKER EBRLS-L	201-87	30.00	DZ	19.49000	\$584.70	05/29/2023
					Schedule Total	\$584.70	
					Item Total for Line 8	\$584.70	
					Total PO Amount	\$7,153.90	

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.

<b>Authorized By</b>		

Courtney Viktor

05/15/2023