

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000317479
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.			Date 05/16/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
			Ship To: 3137 - Tyler:3303 Mineola Hwy HEALTH & HUMAN SERVICES COMMISSION 3303 Mineola Hwy PO Box 5200 Tyler TX 75702 United States

Vendor: 1272070628 7
 AHI ENTERPRISES LLC
 16120 COLLEGE OAK STE 105
 SAN ANTONIO TX 782494044
 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
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NOTE TO PURCHASER: please add the below to the TXSmartBuy copy and PO copy.

SHIP TO LOCATION CODE: 3137
 Health and Human Services Commission
 3303 MINEOLA HWY., TYLER, TX 75702
 ATTENTION TO: DARIN ADAMS / 903-533-4258 / darin.adams@hhs.texas.gov

BILL TO LOCATION CODE: 3135
 Health and Human Services Commission
 302 E. RIECK ROAD, TYLER, TX 75703

SEND INVOICES TO: reg04_admin_services@hhs.texas.gov

BACK UP SUPER USER: michelle.dawis@hhs.texas.gov 903-509-5143

SCOR DIVISION # 13 HHSC - System Support Services

- 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.

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

 To provide office supplies for the warehouse in Region 04.
 CP/ A - Term Contract 615/77
 SHIPPING INST RUCTIONS: Ship according to the DUE DATES specified on the PO.

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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

AGENCY CONTACT:
 Darin Adams
 903-533-4258
 darin.adams@hhs.texas.gov

HHSC BUYER:
 Ana Breest, CTCD, CTCM
 512-406-2679
 Ana.breest@hhs.texas.gov

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(11) other relevant information supporting and explaining the payment requested.

VENDOR:
 AHI Enterprises, LLC, San Antonio
 Mark Nolan
 (210) 653-7770
 mark@ahitexas.com

PURCHASING METHOD: CP-A
 Term Contract: 615-A1
 Term: 8.29.17/8.31.23
 Smartbuy PO: 23149553
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: 233364
 Smartbuy

1-1	R04-Products	615-77	60.00	EA	12.14000	\$728.40	05/25/2023
Schedule Total						\$728.40	
Item Total for Line 1						\$728.40	
2-1	-File Guide, Pressboard, Plain, 1/5-Cut Tab(1-31), Letter Size, Gray/Green, 31 per Set, Cont#-615-A1, CommCd-61545993191, Mfr#-PFX31PX91, Mfr-Tops Products	615-45	20.00	SET	20.57000	\$411.40	05/25/2023
Schedule Total						\$411.40	
Item Total for Line 2						\$411.40	
3-1	Easel Pad, Self Adhesive, 25x30, Unruled, White, 40	785-47	10.00	PCK	28.08000	\$280.80	05/25/2023

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	Sheets,2Pk,Cont#-615-A1,CommCd-78547555603,Mfr#-UNV35603,Mfr-Universal						
Schedule Total						\$280.80	
Item Total for Line 3						\$280.80	
4-1	Stamp,Traditional Line Dater,1-1/2, Type Size,Day,Month and Year,12 Year Band,Cont#-615-A1,CommCd-61577749005,Mfr#-OIC79005,Mfr-Office Mate International Corp	615-77	25.00	EA	3.01000	\$75.25	05/25/2023
Schedule Total						\$75.25	
Item Total for Line 4						\$75.25	
Total PO Amount						\$1,495.85	

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

MBreest CTCD,CTCM

05/16/2023