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-4-0000317514
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			Date 09/01/23	Revision	Page 1
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:	920 Alameda MAN SERVICES COMMISSION	
All shipments, shipp with our Purchase (respondence must be identified		7920 Alameda El Paso TX 79915 United States	5

Vendor: 1742768546 0

JIMENEZ ENTERPRISES INC DBA JAYS AUTOMOTIVE 10217 RIDGEWOOD DR EL PASO TX 799256917

United States

Bill To: Invoice-HHSC Region 10, DADS:

HEALTH & HUMAN SERVICES COMMISSION

401 Franklin Ave

Ste 450

El Paso TX 79901 United States

Fax: 915/834-7587

Purchaser: Hernandez, Natalee

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

FY24 funding

SP/E

Requisition 228723 Pricing per Quote provided by vendor

PO Service Dates 09-01-2023 to 08-31-2024

Goods and/or services are to be delivered and invoiced after September 1, 2023

Attached Terms and Conditions apply to this 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/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2024 are automatically canceled.

Include PO Number on invoices, bills, receipts, bill of 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, and 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.

Vendor contact Johnny Jimenez 915-594-0439 FIXMYCAR@JAYSAUTOMOTIVE.COM

Agency contact Sheia Tillman

Sheila.Tillman@hhs.texas.gov

PCS contact Natalee Hernandez 512-406-2555

915-834-7611

Health and Human Services Commission

Purchase Order

Purchase Order

Ship Via

BEST WAY

Payment Terms

Net 30

Freight Terms

Wipers start at \$16 per blade already installed.

Prepaid & Allow

Dispatch via Print

HHSTX-4-0000317514

\$4,999.00

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			Date 09/01/23	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:	HEALTH & HUM 7920 Alameda	El Paso TX 79915			
Vendor:	1742768546 0 JIMENEZ ENTERPRISES INC DBA JAYS AUTOMOTIVE 10217 RIDGEWOOD DR EL PASO TX 799256917 United States			Bill To:	Invoice-HHSC Region 10, DADS: HEALTH & HUMAN SERVICES 401 Franklin Ave Ste 450 El Paso TX 79901 United States		COMMISSION		
				Fax:	915/834-7587				
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	Purchaser: UOM	Hernandez,Natal	lee Extended Amt	Due Date		
Natalee.her	nandez@hhs.texas.gov								
1-1	FY24 FLEET MAINTENANCE AND REPAIR SERVICES FOR REGION 10	928-47	1.00	LOT	4999.00000	\$4,999.00	09/01/2023		
					Schedule Total	\$4,999.00			
	\$114.63 per hour plus parts. Due to the many note for all of the services or repairs we prov					fleet, it is not feasibl	e to		
Some of the	basic and universally priced services are as f	ollows, but ever	then, they are	e "starting at" pric	ces and tax is extra.				
Oil Changes	start at \$39.95 which include up to 5 qts. oil	, oil filter and a	multi-point D	VI (Digital Vehic	le Inspection).				
Wheel Align	ments start at \$89.95 for most light duty gase	oline operated c	ars and trucks.						
State Inspect	ions are either \$7.00 or \$18.50.								

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.

Item Total for Line 1

Total PO Amount

Performance under this purchase order is acceptance of the attached affirmations and terms and conditions.

Authorized By Matalee Hemandy, CTCD, CTCM

05/17/2023