## **Health and Human Services Commission**

#### **Purchase Order**

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	TX-3-0000317703	
specifications, terms, a	nal bid, Invitation for Offer, or and conditions set forth in the and	dvertisement and vendor's	<b>Date</b> 05/18/23	Revision		
guarantees goods or se requirements.			Ship To:	a Hwy RVICES COMMISSION		

**Vendor:** 1134315136 8

INDUSTRIAL SOLUTIONS DBA INDUSTRIAL SOLUTIONS

PO BOX 500248 AUSTIN TX 787500248

**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

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday - Friday except designated State Holidays. VENDORS SEND INVOICES VIA EMAIL TO: reg04\_admin\_services@hhs.texas.gov

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#### AGENCY CONTACT:

\*\*\*PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO \*\*\*

Agency Contact: Darin Adams

Agency Contact phone: 903-533-4258

Agency Contact email: darin.adams@hhs.texas.gov

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

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.

Dealer VID: 11343151368 Dealer: Industrial Solutions Email: paulette@indsolutions.biz Phone: (512) 506-8070

PURCHASING METHOD: CP/X

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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> 05/18/23	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.  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 COMI 3303 Mineola Hwy PO Box 5200 Tyler TX 75702 United States		-		
Vendor: 113	34315136 8		Bill To:	Invoice-HHSC: Region	04 Headau	

INDUSTRIAL SOLUTIONS DBA INDUSTRIAL SOLUTIONS

PO BOX 500248 AUSTIN TX 787500248 **United States** 

HEALTH & HUMAN SERVICES COMMISSION

302 E Rieck Rd Tyler TX 75703 United States

903 534 8487 Fax:

Email: paula.thurman@hhsc.state.tx.us

Breest, Maria Ana **Purchaser:** 

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

Procurement methods were evaluated, and the best value is provided using the TXMAS contract.

Txmas Contract: TXMAS-18-51V08

Term:7.2.18/6.30.23 Smartbuy PO:

REQUIRÉMENTS/LIMITATIONS:

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY23 Funding.

Invoice per 34 TAC §20.487, amended effective May 1, 2023

Requisition: #233339

1-1	Tape,Box,Sealing,2"x110 Yd Clear Adhesive Sealing Tape,Cont#-TXMAS- 18-51V08,CommCd-44580,Supp#- 74511239,Mfr#-F4085-05,Mfr-Intertape	445-80	180.00	EA	6.22000	\$1,119.60	05/20/2023
					Schedule Total	\$1,119.60	
					Item Total for Line 1	\$1,119.60	
2-1	R04-Handheld Tape Dispensers, Tape width 2", Tape Core 3", Cont#-TXMAS-18-51V06, CommCd-44580, Supp#-62313341, Mfr#-UNV88000, Mfr-Universal	445-80	20.00	EA	13.66000	\$273.20	05/20/2023
					Schedule Total	\$273.20	
					Item Total for Line 2	\$273.20	
					Total PO Amount	\$1,392.80	

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	1134315136 8 INDUSTRIAL SOLUTIONS DBA INDUSTRIAL SOLUTIONS PO BOX 500248 AUSTIN TX 787500248 <b>United States</b>		Bill To:	Invoice-HHSC; Region 04 He HEALTH & HUMAN SERVI 302 E Rieck Rd Tyler TX 75703 United States	
			Fax:	903 534 8487	

Purchaser: Breest, Maria Ana

paula.thurman@hhsc.state.tx.us

**Email:** 

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

Authorized By

MBLUST CTCD,CTCM

05/23/2023