

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-3-0000317974
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 05/22/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
			Ship To: C732 - Austin:701 W 51st St HEALTH & HUMAN SERVICES COMMISSION 701 W 51st St PO Box 149030 Austin TX 78751 United States

Vendor: 1223695478 5
SHI GOVERNMENT SOLUTIONS INC
STE 375
1301 S MO PAC EXPY
AUSTIN TX 787466916
United States

Bill To: Invoice-HHSC MC2065
HEALTH & HUMAN SERVICES COMMISSION
4601 W Guadalupe St
Austin TX 78751
United States

Fax: 512/206-4854
Email: IT_invoicing@hhs.texas.gov

Purchaser: Arriaga,Samantha Danielle

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY23 Purchase

Procurement Type: IT/D
Requisition: 0000227943
WO: 0000001205451
Previous PO: 0000285754
PO Service Dates: 07/20/2023 - 07/20/2024

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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 08/31/2023 are automatically canceled.

Quote: 23272486

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Agency Contact:
Name: Dhiren Patel
Email: Dhiren.patel@hhs.texas.gov

Purchaser Information:
Name: Samantha Arriaga
Email: Samantha.Arriaga@hhs.texas.gov

Vendor: SHI Government Solutions Inc
Vendor Contact: Jonathan Gaudet
Vendor Phone: (800) 870-6079, Option 2
Email: Jonathan_Gaudet@shi.com

1-1	FLARE PLATINUM SUBSCRIPTION 12 MONTHS MADCAP SOFTWARE - PART#: MFLSTEN0001P12 TERM: 7/20/2023 - 7/20/2024	920-45	1.00 EA	2119.50000	\$2,119.50	05/22/2023
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Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Schedule Total						\$2,119.50	
Item Total for Line 1						\$2,119.50	
Total PO Amount						\$2,119.50	

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.

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

Authorized By

Samantha Arriaga, CTCD, CTCM

05/22/2023