## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSIX	<del>-3-0000318005</del>	
specifications, terms	rmal bid, Invitation for Offer, or a, and conditions set forth in the a	dvertisement and vendor's	<b>Date</b> 05/23/23	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:	1081 - Edinburg:2520 S Veterans BI HEALTH & HUMAN SERVICES COMMISSION 2520 S Veterans Blvd		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				PO Box 960 Edinburg TX 78539 United States	) X 78539	
	10010010					

**Vendor:** 3304304304 2

TEXAS COMPTROLLER OF PUBLIC ACCOUNTS BUDGET AND INTERNAL ACCOUNTING

PO BOX 13186 AUSTIN TX 787113186 United States Bill To: Invoice-HHSC Accounting

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

**Fax:** 512/424-6901

Email: HHSC\_AP@hhsc.state.tx.us

Purchaser: Garcia, Reachell

FY23 funding EX/0 - Legal cite TGC 771 Interagency Cooperation Requisition 0000235231 PO Service Dates 5-23-2023 to 08-31-2023

FY23 CTCM Renewal for Alicia Garcia.

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.

Vendor contact Texas Comptroller of Public Accounts 512-463-5355 ctp@cpa.texas.gov

Agency contact Alicia Garcia (956)316-8134 alicia.garcia@hhs.texas.gov

PCS contact Reachell Garcia 512-776-2103 Reachell.garcia@hhs.texas.gov

1-1 963-64 1.00 EA 50.00000 \$50.00 05/23/2023
"CTCM Renewal for Alicia Garcia Cert
ID 1900025525"

Schedule Total \$50.00

Item Total for Line 1 \$50.00

Total PO Amount \$50.00

## **Health and Human Services Commission**

## **Purchase Order**

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Payment Te Net 30	rms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-3-0000318005
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> 05/23/23	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:	1081 - Edinburg:2520 S Veterans BI HEALTH & HUMAN SERVICES COMMISSION 2520 S Veterans Blvd PO Box 960 Edinburg TX 78539 United States
Vendor:	3304304304 2 TEXAS COMPTROLLER OF PUBL BUDGET AND INTERNAL ACCOU PO BOX 13186 AUSTIN TX 787113186 United States		Bill To:	Invoice-HHSC Accounting HEALTH & HUMAN SERVICES COMMISSION 4601 W Guadalupe St Austin TX 78751 United States
			Fax: Email:	512/424-6901 HHSC_AP@hhsc.state.tx.us

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.

Quantity

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.

Class/Item

Line-Sch

**Inventory Item ID - Line Description** 

Authorized By

**Purchaser:** 

**UOM** 

Garcia, Reachell

**Extended Amt** 

**Due Date** 

PO Price

Workin, CTCD

05/23/2023