

Department of State Health Services

Purchase Order

Dispatch via Print

| | | | |
|--|---|-----------------------------|---|
| Payment Terms Net 30 | Freight Terms Prepaid & Allow | Ship Via BEST WAY | Purchase Order HHSTX-3-0000318227 |
| 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 05/24/23 |
| All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number. | | | Revision 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States |
| | | | Page 1 |

Vendor: 1862161688 9
ODP BUSINESS SOLUTIONS LLC
PO BOX 660113
DALLAS TX 75266-0113
United States

Bill To: Invoice-DSHS Fiscal Claims
DEPARTMENT OF STATE HEALTH SERVICES
1100 W 49th St (RBB)
PO Box 149347
Austin TX 78756
United States

Fax: 512/458-7442
Email: invoices@dshs.texas.gov

Purchaser: Viktora,Kourtney Chrissanne

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

FREIGHT: F.O.B Destination Freight Prepaid and Allowed

DELIVERY: 14 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 when the Warehouse is closed.

Please call Agency Delivery Contact to schedule delivery 24 hours prior to arrival.

AGENCY DELIVERY CONTACT:
Alicia Lara
Allie.lara@dshs.texas.gov
(512)776-7153

HHSC BUYER:
Kourtney Viktora
(512)776-2692
Kourtney.viktora@hhs.texas.gov

VENDOR:
Richard Merten
richard.merten@odpbusiness.com
(832) 477-6118
for vendor email stateoftexas@officedepot.com

Omnia and Office Depot Contract Number R190303 expires 6/30/2024
Omnia Office Depot HHS Account Number HHS000840200001 expires 8/31/2025

FY23

PURCHASING METHOD: EX-0

Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

Requisition 0000225448

| | | | | | | | |
|-----|--|--------|------|----|-----------|----------|------------|
| 1-1 | Quartet Cubicle Motion Dry-Erase Board 36"x21" Item #324488 | 785-15 | 4.00 | EA | 113.99000 | \$455.96 | 06/13/2023 |
|-----|--|--------|------|----|-----------|----------|------------|

Schedule Total \$455.96

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Item Total for Line 1 \$455.96

Total PO Amount \$455.96

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.

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| <p>Authorized By <i>Kourtney Viktora CTCD</i></p> | <p>05/30/2023</p> |
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