

# Health and Human Services Commission

## Purchase Order

**TX SmartBuy PO ID**

**Dispatch via Print**

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000318752</b>
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.			<b>Date</b> 06/01/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 1 - 6/1/2023
			<b>Page</b> 1
			<b>Ship To:</b> 4551 - Austin:4301 N Lamar Blvd HEALTH & HUMAN SERVICES COMMISSION 4301 N Lamar Blvd Austin TX 78751 United States

**Vendor:** 1113136595 6  
HENRY SCHEIN INC  
135 DURYEA RD  
MELVILLE NY 117473834  
United States

**Bill To:** Invoice - DADS  
HEALTH & HUMAN SERVICES COMMISSION  
4001 Highway 36 South  
Brenham TX 77833  
United States

**Fax:** 979/277-1865  
**Email:** 712Accounting@hhs.texas.gov

**Purchaser:** Viktora,Kourtney Chrissanne

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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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:  
Whse Supvr Ronnie Romo  
Ph - 512-419-2938  
ronnie.romo@hhs.texas.gov  
Reg Mgr Kris Viles

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

VENDOR:  
800-851-0400  
specialmarkets@henryschein.com  
OMNIA GPO and DSHS Contract # HHS000918300001

OMNIA GPO and Henry Schein Contract # MMS1900159

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 MIM2318791 Line 32

1-1	652-57-00003-0 TOOTHBRUSH 360 SFT CMPCT 72/CS HSCHEIN 5433685	652-57	20.00	CS	\$52.56	\$1,051.20	06/15/2023
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**Schedule Total**                     \$1,051.20

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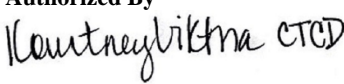
**Item Total for Line 1** \$1,051.20

**Total PO Amount** \$1,051.20

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.

<b>Authorized By</b> 	<b>06/01/2023</b>
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