

Health and Human Services Commission

Purchase Order

TX SmartBuy PO ID 23157293

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000318895
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 06/05/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
			Ship To: 6368 - Pollok:6844 N US Hwy 69 HEALTH & HUMAN SERVICES COMMISSION 6844 N US Hwy 69 Pollok TX 75969 United States

Vendor: 1061523665 9
ALADDIN TEMP-RITE LLC
PO BOX 8500-3431
PHILADELPHIA PA 191783431
United States

Bill To: Invoice - DADS
HEALTH & HUMAN SERVICES COMMISSION
424 Mesquite Dr
PO Box 1132
Mexia TX 76667
United States

Fax: 254/562-1894
Email: 718Accounting@hhs.texas.gov

Purchaser: Ruiz, Steve

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: 06/12/2023

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 Robert Michaud
Ph: 936-853-8376
robert.michaud@hhs.texas.gov
Reg Mgr Taylor Gain

HHSC BUYER:
Steve Ruiz, CTCD
Ph. 254-630-2485
steve.ruiz@hhs.texas.gov

VENDOR:
Aladdin Temp-Rite
Contact: Elaine Barch
Ph: 615-537-3745
Email orders@aladdin-atr.com

QUOTE per Smartbuy

FY23
PREMIER GPO and HHS Contract # HHS000776400001

PREMIER GPO and Aladdin Contract # PP-DI-1786

PURCHASING METHOD: EX-0
Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

Requisition #MIM2318345, Line 11

1-1	240-66-80630-8	240-66	8.00	CS	126.81000	\$1,014.48	06/12/2023
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			Page 2

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DISH DISP SIDE 1 CAV 4M/CS
ALADDIN A05A

Schedule Total \$1,014.48

Item Total for Line 1 \$1,014.48

Total PO Amount \$1,014.48

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

Steve Ruiz, CTCD

06/05/2023