Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHS	TX-4-0000319314
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			Date 09/01/23	Revision	Page 1
guarantees goods or requirements. All shipments, ship	conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order		Ship To: 6014 - Austin:4110 Guadalupe HEALTH & HUMAN SERVICES COMMIS 4110 Guadalupe Bldg 800 Austin TX 78751 United States		1
Vender: 700	02/1018/15		Bill To:	Invoice - DADS	

Vendor: 7002410184 5

JERRAL E BOLING DBA BOLING OPTICAL 2401 RIDGEVIEW KINGSLAND TX 78639-3873

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: Connell,Ron Lee

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

FY24 General Goods Blanket Purchase Order

SP/E

Requisition #: HHSTX-4-0000225433

Requester Name: Tricia Zwahr Facility: Austin State Hospital Phone #: 979-277-1334

Email: Patricia.zwahr@hhs.texas.gov

Lead Contact: Dr. Nijla Shami, 512-419-2368, nijla.shami@hhs.texas.gov

Purchaser Name: Ron Connell Phone #: 512-406-2666

Email: ron.connell@hhs.texas.gov

Vendor Name: JERRAL BOLING dba Boling Optical

Contact: JERRAL BOLING Phone #: 512-809-8940 Email: rbjb844@yahoo.com

Goods and/or services are to be delivered and invoiced after September 1, 2023.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature CPA Procurement Manual, and may be cancelled at any time in whole or part without penalty.

Blanket Transactional Purchase Order FY24 (9/1/23 through 8/31/2024) for Austin State Hospital. Total contract value is \$10,000.00 with no renewals. Total amount cannot exceed \$10,000.00 without authorization from the agency and PCS Purchaser.

Contractor will deliver products within three (3) days after release/call out has been received from the facility requestor.

HHSC does not commit to ordering specific dollar amounts with respect to this contract. Quantities may be increased or decreased upon need during the term of the contract. Forecasted quantities are estimates only and do not constitute a guarantee of purchase. The agency shall be obligated to pay for only those goods actually ordered and received by the agency. Any funds not utilized by 08-31-24 are automatically cancelled.

** VENDORS SEND INVOICES VIA EMAIL TO **

712Accounting@hhs.texas.gov

Invoicing and Payment: The invoice shall contain all the following in order to be considered for payment: PO number referenced, a unique invoice number, invoice date, and the total invoice amount. Each invoice shall also have an attached copy of the bill in order to be paid. Mail all original invoices to the BILL TO ADDRESS ON PO. Payment terms are net thirty days (30) unless a discount has been offered. Facility is not responsible for failure by the vendor to properly invoice which may delay payment processing.

Health and Human Services Commission

Purchase Order

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					Dispat	ch via Print
Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	ı	HHSTX-4-00	00319314
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. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Date 09/01/23	Revision		Page 2
			Ship To:	6014 - Austin:4110 Guadalupe HEALTH & HUMAN SERVICES COMMISSION 4110 Guadalupe Bldg 800 Austin TX 78751 United States		
			Fax: Email:	979/277-1865 712Accounting@h	hs.texas.gov	
			Purchaser:	Connell,Ron Lee		
Line-Sch Invent	ory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
Deliver to SHIP TO Freight Terms are I Delivery hours are	CORRESPONDENCE MUST RE ADDRESS ON PO Please included in the second secon	ude PO NUMBERS ON PA owed/Add. 30 PM Monday thru Friday	CKING SLIPS, CARTO	ONS, PACKAGES,	BUNDLES, ETC.	losed.

1-1 625-26 1.00 LOT 10000.00000 \$10,000.00 09/01/2023

SERVICE REPAIRS AND NEW GLASSES

Schedule Total	\$10,000.00
Item Total for Line 1	\$10,000.00
Total PO Amount	\$10,000.00

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	
Reef.	<u>06/09/2023</u>