

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000319597
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 06/14/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
			Ship To: 5070 - Harlingen: 1401 S Rangerville DEPARTMENT OF STATE HEALTH SERVICES 1401 S Rangerville Rd PO Box 2668 Harlingen TX 78552 United States

Vendor: 1363684738 9
ULINE INC
PO BOX 88741
CHICAGO IL 606801741
United States

Bill To: Invoice-DSHS Accounts Payable
HEALTH & HUMAN SERVICES COMMISSION
6711 S New Braunfels
Ste 100
San Antonio TX 78223
United States

Fax: 210/531-7883
Email: SAHAccounting@dshs.texas.gov

Purchaser: Alexander, Leslie L 512/406-2424

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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NOTE: Email invoices to SAHAccounting@dshs.texas.gov

FY23 Purchase

Procurement Type: SP/E

Requisition #: 0000232296

INVOICING See Header Comments

See above for SHIP TO ADDRESS ON PO

AGENCY CONTACT:

Name: Mary Castillo / 956-364-8476
Email: Mary.Castillo@hhs.texas.gov

HHSC terms and conditions attached

Purchaser Information:

Name: Leslie Alexander
Phone #: 512-406-2424
Email Address: Leslie.Alexander@hhs.texas.gov

Vendor Information:

Vendor Name: Uline
Contacts: Customer Service
Telephone #: 800-295-5505
Email: Customer.Service@uline.com

Price Request #: 86058639 /Date: 04/10/2023

Freight terms are FOB Destination Prepaid and Allowed
Terms: Net 30

1-1	Item# H-4606 RUBBERMAID@ HIGH-SECURITY CART	485-64	6.00	EA	675.00000	\$4,050.00	06/21/2023
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Schedule Total \$4,050.00

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Item Total for Line 1						\$4,050.00	
2-1	Item# S-18403 REPLACEMENT BAG FOR RUBBERMAID® CARTS H-3457 AND H-4606	485-05	6.00	EA	63.50000	\$381.00	06/21/2023
Schedule Total						\$381.00	
Item Total for Line 2						\$381.00	
3-1	Item# H-4507 MICROFIBER MOP SYSTEM BUCKET	485-68	6.00	EA	38.00000	\$228.00	06/21/2023
Schedule Total						\$228.00	
Item Total for Line 3						\$228.00	
4-1	Shipping and Handling	962-86	1.00	LOT	140.93000	\$140.93	06/21/2023
Schedule Total						\$140.93	
Item Total for Line 4						\$140.93	
Total PO Amount						\$4,799.93	

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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Authorized By 	06/14/2023
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