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-3-0	000319842	
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 06/16/23	Revision Page		
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.		Ship To:	1081 - Edinburg:2520 S Veterans Bl HEALTH & HUMAN SERVICES COMMISSION 2520 S Veterans Blvd			
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.		PO Box 960 Edinburg TX 78539 United States				
** 1 12/	21027105 0			I : IIIICA		

Vendor: 1391837105 8

4IMPRINT INC 25303 NETWORK PL CHICAGO IL 606731253

United States

Bill To: Invoice-HHSC Accounting

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

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

FY23 Purchase

Procurement Type: SP/E

Requisition #: 0000233429

INVOICING - See above for Bill to Information

See above for SHIP TO ADDRESS ON PO

AGENCY CONTACT:

Name: Judy Sanchez / 956-316-8263 Email: Judy.Sanchez@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: 4 Imprint Contact: Laura Wollerman Phone: 888-589-8772

Email: lwollerman@4imprint.com

Quote #: 24867956/ Date: 04/17/2023

Freight terms are FOB Destination Prepaid and Allowed

Terms: Net 30

1-1 037-52 250.00 EA 8.69000 \$2,172.50 06/23/2023 144195 Ribbed Fleece Blanket

 Schedule Total
 \$2,172.50

 Item Total for Line 1
 \$2,172.50

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United States

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

512/424-6901 Fax:

HHSC_AP@hhsc.state.tx.us **Email:**

				Purchas	ser: Alexander,Leslie	L 5	12/406-2424
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
2-1	Set-Up Charge	963-39	1.00	EA	55.00000	\$55.00	06/23/2023
					Schedule Total	\$55.00	
				I	tem Total for Line 2	\$55.00	
3-1 F1	Freight	962-86	1.00	EA	267.30000	\$267.30	06/23/2023
					Schedule Total	\$267.30	
				I	tem Total for Line 3	\$267.30	
					Total PO Amount	\$2,494.80	

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 Lastin Hant S, CTP 06/16/2023