## **Health and Human Services Commission**

#### **Purchase Order**

**Dispatch via Print** 

| Payment To<br>Net 30                       | erms Freight Terms<br>Prepaid & Allow  | Ship V<br>BEST V   |          | Purchase Order   | HF   | ISTX-3-0000320266     |
|--|--|--------------------|----------|------------------|--|-----------------------|
| specification                              | d by informal bid, Invitation for Offer, or Rens, terms, and conditions set forth in the adv   | vertisement and ve | ndor's   | Date<br>06/22/23 | Revision   | Page<br>1             |
| guarantees g<br>requirement<br>All shipmer | responses become a part of this numbered p<br>goods or services delivered meet or exceed r<br>is.<br>nts, shipping papers, invoices, and corres<br>urchase Order Number. | numbered purchas   | e order  | Ship To:         | 1081 - Edinburg:2520 S Veterans Bl<br>HEALTH & HUMAN SERVICES COMMISSI<br>2520 S Veterans Blvd<br>PO Box 960<br>Edinburg TX 78539<br>United States |                       |
| Vendor:                                    | 1391837105 8<br>4IMPRINT INC<br>25303 NETWORK PL<br>CHICAGO IL 606731253<br><b>United States</b>   |                    |          | Bill To:         | Invoice-HHSC Accoun<br>HEALTH & HUMAN<br>4601 W Guadalupe St<br>Austin TX 78751<br>United States   | SERVICES COMMISSION   |
|  |  |                    |          | Fax:<br>Email:   | 512/424-6901<br>HHSC_AP@hhsc.state   | e.tx.us               |
|  |  |                    |          | Purchaser:       | Vasquez lii,Richard  |                       |
| Line-Sch                                   | <b>Inventory Item ID - Line Description</b>  | Class/Item         | Quantity | UOM              | PO Price I   | Extended Amt Due Date |

SP/E

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

FREIGHT: F.O.B. Destination Freight Prepaid Allowed

DELIVERY: 10 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

AGENCY CONTACT: judy.sanchez@hhs.texas.gov 956/316-8263

HHSC BUYER: Richard Vasquez richard.vasqueziii@hhs.texas.gov 512-639-7327

VENDOR: 4Imprint Email: lschmitz@4imprint.com Fax: 855-291-7381 Phone: 877-446-7746 Ext. 8519

101 Commerce St PO Box 320 Oshkosh, WI 54901

QUOTE 24867915

PURCHASING METHOD: SP/E

Not to Exceed \$10,000.00

**REQUIREMENTS/LIMITATIONS:** 

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding.

## **Health and Human Services Commission**

#### **Purchase Order**

|  |  |                                       |                    |                                    |  | Dispa  | tch via Prin             |  |
|--|--|---------------------------------------|--------------------|------------------------------------|--|--|--------------------------|--|
| <b>D</b> ( <b>T</b>  |  |                                       |                    |                                    |  | 2.000  |                          |  |
| Payment To<br>Net 30   | erms Freight Terms<br>Prepaid & Allow  | Ship V<br>BEST                        |                    | Purchase O                         | rder   | HHSTX-3-0  | 00032026                 |  |
| If advertised specification  | avertised by informal bid, Invitation for Offer, or Request for Proposal; all cifications, terms, and conditions set forth in the advertisement and vendor's |                                       |                    | Date<br>06/22/23                   | Revision   |  | Pag                      |  |
| Specifications, terms, and contains set form in the advertisement and ventors of conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.<br>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number. |  |                                       |                    | Ship To:                           | HEALTH & H<br>2520 S Veterar<br>PO Box 960   | Edinburg TX 78539  |                          |  |
| Vendor:  | 1391837105 8<br>4IMPRINT INC<br>25303 NETWORK PL<br>CHICAGO IL 606731253<br><b>United States</b>   |                                       |                    | Bill To:                           | HEALTH & H<br>4601 W Guada   | Invoice-HHSC Accounting<br>HEALTH & HUMAN SERVICES COMMISSION<br>4601 W Guadalupe St<br>Austin TX 78751<br>United States<br>512/424-6901<br>HHSC_AP@hhsc.state.tx.us |                          |  |
|  |  |                                       | Fax:<br>Email:     |                                    |  |  |                          |  |
|  |  |                                       |                    | Purchaser:                         | Vasquez lii,R  |  |                          |  |
|  | Inventory Item ID Line Decer   | ation (localitam                      | Quantity           |                                    |  |  |                          |  |
|  | Inventory Item ID - Line Descrip<br>r 34 TAC §20.487, amended effec  |                                       | Quantity           | UOM                                | PO Price   | Extended Amt   | Due Date                 |  |
| Invoice per  |  |                                       | Quantity<br>250.00 | EA                                 |  | Extended Amt<br>\$117.50   | 06/30/2023               |  |
| Invoice per  | r 34 TAC §20.487, amended effec  | tive May 1, 2022                      |                    |                                    |  | \$117.50   |                          |  |
| Invoice per  | r 34 TAC §20.487, amended effec  | tive May 1, 2022                      |                    | EA                                 | .47000   | \$117.50<br>\$117.50   |                          |  |
| Invoice per<br>Requisition<br>1-1  | r 34 TAC §20.487, amended effec  | tive May 1, 2022                      |                    | EA                                 | .47000<br>Schedule Total   | \$117.50<br>\$117.50   |                          |  |
| Invoice per<br>Requisition<br>1-1  | r 34 TAC §20.487, amended effec<br>n #0000233777<br>9764 Mardi Gras Pen  | ctive May 1, 2022<br>620-80           | 250.00             | EA<br>Item 7                       | .47000<br>Schedule Total<br>Fotal for Line 1   | \$117.50<br>\$117.50<br>\$117.50<br>\$117.50   | 06/30/2023               |  |
| Invoice per<br>Requisition<br>1-1  | r 34 TAC §20.487, amended effec<br>n #0000233777<br>9764 Mardi Gras Pen  | ctive May 1, 2022<br>620-80           | 250.00             | EA<br>Item 7<br>EA                 | .47000 Schedule Total Fotal for Line 1 15.00000  | \$117.50<br>\$117.50<br>\$117.50<br>\$117.50<br>\$15.00<br>\$15.00   | 06/30/2023               |  |
| Invoice per<br>Requisition<br>1-1<br>2-1   | r 34 TAC §20.487, amended effec<br>n #0000233777<br>9764 Mardi Gras Pen  | ctive May 1, 2022<br>620-80           | 250.00             | EA<br>Item 7<br>EA                 | .47000 Schedule Total Fotal for Line 1 15.00000 Schedule Total                           | \$117.50<br>\$117.50<br>\$117.50<br>\$117.50<br>\$15.00<br>\$15.00   | 06/30/2023<br>06/30/2023 |  |
| Invoice per<br>Requisition<br>1-1<br>2-1   | r 34 TAC §20.487, amended effec<br>n #0000233777<br>9764 Mardi Gras Pen<br>set up charge   | etive May 1, 2022<br>620-80<br>620-80 | 250.00             | EA<br>Item 7<br>EA<br>Item 7       | .47000 Schedule Total Fotal for Line 1 15.00000 Schedule Total Fotal for Line 2          | \$117.50<br>\$117.50<br>\$117.50<br>\$15.00<br>\$15.00<br>\$15.00<br>\$11.75   | 06/30/2023<br>06/30/2023 |  |
| •  | r 34 TAC §20.487, amended effec<br>n #0000233777<br>9764 Mardi Gras Pen<br>set up charge   | etive May 1, 2022<br>620-80<br>620-80 | 250.00             | EA<br>Item 7<br>EA<br>Item 7<br>EA | .47000 Schedule Total Total for Line 1 15.00000 Schedule Total Total for Line 2 11.75000 | \$117.50<br>\$117.50<br>\$117.50<br>\$117.50<br>\$117.50<br>\$15.00<br>\$15.00<br>\$11.75<br>\$11.75   | 06/30/2023<br>06/30/2023 |  |

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.

# Health and Human Services Commission

### **Purchase Order**

|   |  |                          |                         |                |  | Dispatch via Print      |
|---|--|--------------------------|-------------------------|----------------|--|-------------------------|
| Payment Terr<br>Net 30  | ms Freight Terms<br>Prepaid & Allow  | <b>Ship Vi</b><br>BEST W |                         | Purchase Order |  | HHSTX-3-0000320266      |
| 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 |  |                          | <b>Date</b><br>06/22/23 | Revision       | Page<br>3  |                         |
| guarantees goo<br>requirements.<br>All shipments  | sponses become a part of this numbered p<br>ods or services delivered meet or exceed r<br>s, shipping papers, invoices, and corresp<br>chase Order Number. | umbered purchase         | order                   | Ship To:       |  |                         |
| Vendor:   | 1391837105 8<br>4IMPRINT INC<br>25303 NETWORK PL<br>CHICAGO IL 606731253<br>United States  |                          |                         | Bill To:       | Invoice-HHSC Ac<br>HEALTH & HUM<br>4601 W Guadalup<br>Austin TX 78751<br>United States | IAN SERVICES COMMISSION |
|   |  |                          |                         | Fax:<br>Email: | 512/424-6901<br>HHSC_AP@hhsc.  | .state.tx.us            |
|   |  |                          |                         | Purchaser:     | Vasquez lii,Richa  | ard                     |
| Line-Sch  | Inventory Item ID - Line Description   | Class/Item               | Quantity                | UOM            | PO Price   | Extended Amt Due Date   |

Authorized By Rechel Vargey & CTCD, CTCD <u>06/23/2023</u>