## **Department of State Health Services**

## **Purchase Order**

**Dispatch via Print** 

Payment Terr Net 30	ms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	ŀ	HHSTX-4-0000320374	
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.			<b>Date</b> 09/01/23	Revision Page		
			Ship To:	4549 - San Antonio:6711 S New Brau HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States		
Vendor:	1741834707 0 ACE MART RESTAURANT SUPPL	Y COMPANY	Bill To:	Texas Center for In DEPARTMENT O	nfectious Di F STATE HEALTH SERVICES	

PO BOX 18100

SAN ANTONIO TX 782180100

**United States** 

Purchaser:	Breest.Maria Ana	

2303 SE Military Dr

United States

San Antonio TX 78223

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

SP/E - Spot Purchase Up to \$10,000.00 **BLANKET PURCHASE ORDER** 

TERM: September 1, 2023 through August 31, 2024

SHIPPING INSTRUCTIONS: DO NOT SHIP until notified by Agency Contact.

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

Send invoices: GRTCIDFiscalServices@dshs.texas.gov

AGENCY CONTACT: Laura Longoria 210-393-4039

Laura.longoria@dshs.texas.gov

HHSC BUYER: Ana Breest, CTCD, CTCM 512-406-2679 Ana.breest@hhs.texas.gov

**VENDOR:** Ace Mart David E Chesko 210-323-4503 dchesko@acemart.com Quote # Supply List

PURCHASING METHOD: SP/E

Purchase not to exceed \$10,000.00. Rule 34 Texas Administrative Code § 20.41 - Delegated Purchases

REQUIREMENTS/LIMITATIONS:

Quantities may be increased or decreased upon need during the term of the PO.

The quantities shown are estimates only and do not constitute a guarantee of purchase. Any quantities not ordered and received by August 31, 2024, will be considered cancelled.

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

FY24 Funding

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

Invoice per 34 TAC §20.487, amended effective May 1, 2022

Requisition # 219857

Note: Agency will not order products on this PO that are available from Workquest, Texas Correctional Industries or DIR. Agency will not order capital or controlled assets on this PO.

## **Department of State Health Services**

## **Purchase Order**

**Dispatch via Print** 

Payment Ten Net 30	rms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX-	-4-0000320374
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.			<b>Date</b> 09/01/23	Revision	<b>Page</b> 2
			Ship To:	4549 - San Antonio:6711 S New Brau HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States	
Vendor:	1741834707 0 ACE MART RESTAURANT SUPPL PO BOX 18100 SAN ANTONIO TX 782180100 United States	LY COMPANY	Bill To:	Texas Center for Infectious Di DEPARTMENT OF STATE HI 2303 SE Military Dr San Antonio TX 78223 United States	EALTH SERVICES

				Purch	aser: Breest, Maria Ana		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	<b>Due Date</b>
1-1	Restaurant supplies for kitchen	165-07	1.00	LOT	8000.00000	\$8,000.00	09/01/2023
					Schedule Total	\$8,000.00	
					Schedule Total	\$6,000.00	
					Item Total for Line 1	\$8,000.00	
					Total PO Amount	\$8,000.00	

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	
MBrust CTCD,CTCM	06/23/2023