

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-3-0000320652
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 06/28/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
			Ship To: 0011 - Abilene:4601 S 1st St HEALTH & HUMAN SERVICES COMMISSION 4601 S 1st St PO Box 521 Abilene TX 79605 United States

Vendor: 1203860421 6
PACIFIC STAR CORPORATION
4350 S WAYSIDE DR STE 106
HOUSTON TX 770871129
United States

Bill To: Invoice-HHSC Region 2/9, Commu
HEALTH & HUMAN SERVICES COMMISSION
4601 S 1st St
PO Box 521
Abilene TX 79605
United States

Email: Reg02_Admin_Services@hhs.texas.gov

Purchaser: Connell,Ron Lee

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

FY23 General Goods

Spot Purchase Open Market
SP/E

Requisition #: HHSTX-3-0000229730

Requester: CHARLIE CRUZ
Phone #: 325-795-5613
Email: Charlie.cruz@hhs.texas.gov

SHIP TO ATTN: MARY GARCIA, 325-795-5516, mary.garcia3@hhs.texas.gov

Purchaser Name: Ron Connell
Phone #: 512-406-2666
Email: ron.connell@hhs.texas.gov

Vendor Name: Pacific Star Corporation
Contact: Himmatul Aufa
Phone #: 713-527-0889
Email: customer@pfstar.com

Goods and/or services are to be delivered and invoiced after September 1, 2022.

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.

Quote # EST12440

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.

1-1	Ice Melt Spreader - 65 lb Capacity H-2813	515-75	1.00	EA	296.28000	\$296.28	07/12/2023
-----	---	--------	------	----	-----------	----------	------------

Schedule Total \$296.28

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-3-0000320652
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 06/28/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 0011 - Abilene:4601 S 1st St HEALTH & HUMAN SERVICES COMMISSION 4601 S 1st St PO Box 521 Abilene TX 79605 United States
			Page 2

Vendor: 1203860421 6
PACIFIC STAR CORPORATION
4350 S WAYSIDE DR STE 106
HOUSTON TX 770871129
United States

Bill To: Invoice-HHSC Region 2/9, Commu
HEALTH & HUMAN SERVICES COMMISSION
4601 S 1st St
PO Box 521
Abilene TX 79605
United States

Email: Reg02_Admin_Services@hhs.texas.gov

Purchaser: Connell,Ron Lee

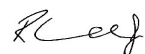
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Item Total for Line 1						\$296.28	
2-1	Plastic Smoker's Receptacle - Beige H-1103BE	485-94	3.00	EA	98.80000	\$296.40	07/12/2023
Schedule Total						\$296.40	
Item Total for Line 2						\$296.40	
3-1	Smoker's Receptacle Liners S-17201	485-75	3.00	PCK	60.60000	\$181.80	07/12/2023
Schedule Total						\$181.80	
Item Total for Line 3						\$181.80	
Total PO Amount						\$774.48	

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



06/28/2023

