

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-4-0000320890
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 09/01/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 6065 - Pollok:6844 N US Hwy 69 HEALTH & HUMAN SERVICES COMMISSION 6844 N US Hwy 69 PO Drawer 1648 Pollok TX 75969 United States
			Page 1

Vendor: 1201280026 9
SUPERIOR KITCHEN SERVICES LLC
AQUA TEK
1439 CARRELL RD
LUFKIN TX 759014687
United States

Bill To: Invoice - DADS
HEALTH & HUMAN SERVICES COMMISSION
424 Mesquite Dr
PO Box 1132
Mexia TX 76667
United States

Fax: 254/562-1894
Email: 718Accounting@hhs.texas.gov

Purchaser: Munoz,Gilbert J

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY24 funding
SP/E
Requisition 226620 Pricing per Estimate # 3028 3029
PO Service Dates 09-01-2023 to 08-31-2024
Goods and/or services are to be delivered and invoiced after September 1, 2023

Attached Terms and Conditions apply to this Purchase Order.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2024 are automatically canceled.

Vendor contact
First and Last Name: Mike Lovelace
Phone number: 936-634-4177
Email address: aquateksks@gmail.com

Agency contact
First and Last Name: Bill Williams
Phone number: 936-853-8405
Email address: Frank.Williams@hhs.texas.gov
Facility: Lufkin State Supported Living Center

PCS contact
First and Last Name: Gilbert Munoz
Phone number: 512-406-2473
Email address: Gilbert.Munoz@hhs.texas.gov

1-1	FY24 (Service) Vent-a-hood cleaning for main and canteen kitchens for Lufkin SSLC	931-30	1.00	LOT	5000.00000	\$5,000.00	09/01/2023
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Schedule Total		\$5,000.00
Item Total for Line 1		\$5,000.00

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Total PO Amount						\$5,000.00	

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

Gilbert J. Munoz, CTCO, CTCM

06/29/2023