Health and Human Services Commission

Purchase Order

Payment Terms	Freight Terms	Ship V		_			000334005
Net 30	Prepaid & Allow	BEST '		Purchase Order	Devision	HHSTX-4-0	
specifications, terms,	dvertised by informal bid, Invitation for Offer, or Request for Proposal; all cifications, terms, and conditions set forth in the advertisement and vendor's forming responses become a part of this numbered purchase order. Contractor		Date 09/01/23	Revision 4551 - Austin:4301 N Lamar Blvd		Page	
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		Ship To:	Ship To: 4551 - Austin:4301 N I HEALTH & HUMAN S 4301 N Lamar Blvd Austin TX 78751		OMMISSION		
with our Purchase O		•			United States	I	
PKU PO I PLE	1812438654 3 PKU PERSPECTIVE LLC PO BOX 696 PLEASANT GROVE UT 840620696 United States			Bill To:	Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 4001 Highway 36 South Brenham TX 77833 United States		
				Fax: Email:	979/277-1865 712Accounting@	∂hhs.texas.gov	
				Purchaser:	Wilson,Madison	n Faith	
Line-Sch Invento	ory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
FREIGHT: F.O.B. D DELIVERY: DO NO Delivery hours are f Holidays	1, 2023 through August 31, 20 ICTIONS: DO NOT SHIP until Destination Freight Prepaid All DT SHIP until notified by Agen from 8:00-11:30 AM and 1:00-	notified by Agend lowed locy Contact.		pt designated State			
FREIGHT: F.O.B. D DELIVERY: DO NO Delivery hours are f Holidays AGENCY CONTAC Patricia Aros 512-374-6425 Patricia.Aros@hhs.: Ship to Attn: Patricia 4301 N Lamar Blvd Austin, TX 78751 HHSC BUYER: Madison Wilson 254-744-4512	ICTIONS: DO NOT SHIP until Destination Freight Prepaid All DT SHIP until notified by Agen rom 8:00-11:30 AM and 1:00- T: texas.gov a Aros	notified by Agend lowed locy Contact.		ept designated State			
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Payment Ter Net 30	Prepaid & Allow	Ship V BEST	WAY	Purchase Order		HHSTX-4-000	
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				Fax: Email:	979/277-1865 712Accounting	@hhs.texas.gov	
				Purchaser:	Wilson,Madiso	on Faith	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt E	Due Date
	y will not order products on this PO tha DIR. Agency will not order capital or co				al 5000.00000	\$5,000.00 09	//01/2023
	FY24 PKU Perspective	393-30	1.00				//01/2023
				Sche Item Total	dule Total	\$5,000.00	
				Total P	O 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	
Madison Wilson	
	07/05/2023