Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	9	Ship Via		IIIICTV	4 0000224240	
Net 30	FOB Dest. Prepaid & Allowed	BEST WAY	Purchase Order		-4-0000321248	
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			Date 09/01/23	Revision	Page 1	
	onses become a part of this numbered purcha s or services delivered meet or exceed number		Ship To:	4548 - Harlingen:1401 S Rangervill HEALTH & HUMAN SERVICES COMMISSION 1401 S Rangerville Rd		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				Harlingen TX 78552 United States		
Vendor:	1300582584 2 MUNIZ RIO GRANDE PHARMACY LLC 1117 S COMMERCE ST HARLINGEN TX 785507706 United States	,	Bill To: Invoice-DSHS Accounts Payable HEALTH & HUMAN SERVICE 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States			
			Fax: Email:	210/531-7883 SAHAccounting@dshs.texas.g	gov	

Purchaser: Fletcher, Patricia Rose

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

Agency Contact: Mike Torres Phone: 956/364-8244

EMAIL: mike.torres@hhs.texas.gov

HHSC PCS CONTACT: Patricia Fletcher Phone: 512-406-2538

EMAIL: Patricia.Fletcher@hhsc.state.tx.us

VENDOR: Muniz Pharmacy Name Clarissa Aguilar Tel # 956/423-1753

Email: c.aguilar@munizpharmacy.com

Please find a copy of our standard terms and conditions attached. Please confirm receipt of this purchase order.

NOTE: FREIGHT TERMS ARE FOB DESTINATION PREPAY AND ALLOW

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday

Friday except designated State Holidays

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

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

This Blanket Purchase Order is for the period of 9/1/2023 through 8/31/2024. Please do not ship or invoice prior to 9/1/2023. *****Do not ship until notified by the Agency contact. *****

Your invoices are not to exceed \$5000.00

HHSC does not commit to ordering specific dollar amounts with respect to this contract. The agency shall be obligated to pay for only those goods actually ordered and received by the agency. Any funds not utilized by 08/31/2024 are automatically cancelled.

1-1 269-72 1.00 LOT 2500.00000 \$2,500.00 09/01/2023

FY24 F3G010 Provide, on an as needed basis, after hours nonstock and/or emergency medications for the clients/patients of the Rio Grande State Center State Hospital

Schedule Total \$2,500.00

Health and Human Services Commission

Purchase Order

Payment Terms

Freight Terms

Dispatch via Print

Payment Te Net 30	Freight Terms FOB Dest. Prepaid & Allowe	Ship V d BEST		Purchas	se Order	HHSTX-	4-0000321248	
specification	by informal bid, Invitation for Offer, or R s, terms, and conditions set forth in the adv	vertisement and ve	endor's	Date 09/01/23	Revis	sion	Page 2	
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.				Ship To:	HEAI 1401 Harlir	4548 - Harlingen: 1401 S Rangervill HEALTH & HUMAN SERVICES COMMIS: 1401 S Rangerville Rd Harlingen TX 78552 United States		
Vendor:	1300582584 2 MUNIZ RIO GRANDE PHARMACY LLC 1117 S COMMERCE ST HARLINGEN TX 785507706 United States			Bill To:	HEAI 6711 Ste 10 San A	Invoice-DSHS Accounts Payable HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States		
				Fax: Ema		531-7883 Accounting@dshs.texas.gov	7	
				Purchase		her,Patricia Rose		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Pi	rice Extended	Amt Due Date	
LINE 2 DA7	010 F4400 7312 720 F4400 7312 080 F4400 7312 OPC FY24 DA720 Provide, on an as needed	269-72	1.00	It d	em Total for Lin 2500.000			
	basis, after hours nonstock and/or emergency medications for the clients/patients of the Rio Grande State Center State Supported Living Center				Schedule To	otal \$2,500	0.00_	
FY24 CG2 R	RGSC MEDS MUNIZ PHARM							
LINE 2 DA7	010 F4400 7312 /20 F4400 7312 080 F4400 7312 OPC							
				Ite	em Total for Lin	se 2 \$2,500	.00	
					Total PO Amo	Sount \$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

Papian Fletches, CTCD, CTCM

07/07/2023