## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via		LUIOTY	4 0000004004
Net 30	N/A, Service, Pick up, etc.	NONE	Purchase Order	HHSIX	-4-0000321684
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			<b>Date</b> 09/01/23	Revision Page	
conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.			Ship To:	p To:  0651 - Coldspring:1 State Hwy 150 HEALTH & HUMAN SERVICES COMMISSION 1 State Hwy 150 Rm B10 Coldspring TX 77331 United States	
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.					
** 17.	15000505.0		D		• .

**Vendor:** 1746000525 3

SAN JACINTO COUNTY TAX OFFICE

SAN JACINTO COUNTY CHILD WELFARE BOARD

ATTN STANLEY LILES

8 HIGH DR

POINTBLANK TX 773647092

**United States** 

Bill To: Invoice-HHSC Reg 05; Administ

HEALTH & HUMAN SERVICES COMMISSION

350 Pine St Flr 9 Beaumont TX 77701 United States

409/951-3209

Email: Reg05\_Admin\_Services@hhsc.state.tx.us

Purchaser: Smith, Andre

Fax:

Line-Sch Inventory Item ID - Line Description Class/Item Quantity UOM PO Price Extended Amt Due Date
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FY24 Funding PO PO Expires 8/31/24 Region #5 LEASE #9749

TGC CHAPTER 2167. LEASE OF SPACE FOR STATE AGENCIES

HHSC/PCS CONTACT: Andre Smith 512-406-2567 andre.smith@hhs.texas.gov

CONTRACT MANAGER LeTony Hadnot, 409-730-4015 letony.hadnot@hhs.texas.gov

PM/PCC: EX/0

Requisition:0000224173

1-1 971-45 1.00 LOT 30633.00000 \$30,633.00 08/31/2024

R05-" FY24Renewal Lease - 1 State Hwy 150, Rm B10, Coldspring #9749"

 Schedule Total
 \$30,633.00

 Item Total for Line 1
 \$30,633.00

**Total PO Amount** \$30,633.00

## **Health and Human Services Commission**

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Vendor:	1746000525 3 SAN JACINTO COUNTY TAX OFFICE SAN JACINTO COUNTY CHILD WEL ATTN STANLEY LILES 8 HIGH DR POINTBLANK TX 773647092 United States		Bill To:	Invoice-HHSC Reg 05; Administ HEALTH & HUMAN SERVICES COMMISSION 350 Pine St Flr 9 Beaumont TX 77701 United States	
			Fax: Email:	409/951-3209 Reg05_Admin_Services@hhsc.state.tx.us	
			Purchaser:	Smith,Andre	

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.

Quantity

UOM

PO Price

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.

Class/Item

Line-Sch

**Inventory Item ID - Line Description** 

**Authorized By** 

07/13/2023

Extended Amt

Due Date