Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Ter	9	Ship Via		HICTY	4 000000000
Net 30	FOB Dest. Prepaid & Allowed	BEST WAY	Purchase Order	HHOIX-	4-0000323225
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. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Date 09/01/23	Revision	Page 1
			Ship To:	2203 - Big Spring:1901 N Highway 8 HEALTH & HUMAN SERVICES COMMISSION 1901 N Highway 87 Big Spring TX 79720 United States	
Vendor:	1752426676 8 A 1 LOCK & KEY SHOP 812 W 3RD ST BIG SPRING TX 797202204 United States		Bill To:	Invoice - DADS HEALTH & HUMAN SERVIC 2501 Maple St PO Box 451 Abilene TX 79602 United States	ES COMMISSION

Fax: 325/795-3807

Email: 710Accounting@hhsc.state.tx.us

Purchaser: Fletcher, Patricia Rose

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

Agency Contact: Joshua Rainey

Phone: 432/268-7443

EMAIL: joshua.rainey@hhs.texas.gov

VENDOR: A-1 Lock Key Name Dennis Burns Tel # 432/263-3409

Email:DennisBurns59@gmail.com

HHSC PCS CONTACT: Patricia Fletcher

Phone: 512-406-2538

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

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

FREIGHT: F.O.B. Destination Freight Prepaid Allowed

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday Friday except designated State Holidays

PURCHASING METHOD: OM/F Texas Government Code 2156.063 Not to Exceed

\$25,000

REQUIREMENTS/LIMITATIONS:

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2024 funding

Invoice per 34 TAC §20.487, amended effective May 1, 2022 or email: 710Accounting@hhsc.state.tx.us

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 \$15000.00

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.

1-1 450-55 1.00 YR 15000.00000 \$15,000.00 09/01/2023

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			Fax: Email:	325/795-3807 710Accounting@hhsc.state.tx.us		
			Purchaser:	Fletcher,Patricia Rose		
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
	Spring State Hospital from 9/1/23 to 8/31/24					
			Scho	Schedule Total \$15,000.00		
			Item Total			
			Total P	O Amount	\$15,000.00	

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
Patrice Fletcles, CTCD, CTCM
07/26/2023