Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Ter	rms Freight Terms	Ship Via		11110=1/1 / 000000 /00=
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-4-0000324397
If advertised by informal bid, Invitation for Offer, or Request for Proposal; all			Date	Revision Page
specifications, terms, and conditions set forth in the advertisement and vendor's			09/01/23	1
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:	4038 - Corpus Christi:902 Airport HEALTH & HUMAN SERVICES COMMISSION 902 Airport Rd Corpus Christi TX 78405 United States
Vendor:	1742908206 2 PEST PATROL INC PO BOX 270777 CORPUS CHRISTI TX 784270777 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

Quantity

Purchaser:

UOM

FY24 funding
SP/E
Requisition 233003 Pricing per invoice
PO Service Dates 09-01-2023 to 08-31-2024
Goods and/or services are to be delivered and invoiced after September 1, 2023

Class/Item

Attached Terms and Conditions apply to this Purchase Order.

Inventory Item ID - Line Description

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 CHELSEA NIELSEN 361-852-4002 bugs@grandecom.net

Line-Sch

Agency contact John Henley 361-241-5312 john.henley@hhs.texas.gov

PCS contact Natalee Hernandez 512-406-2555 Natalee.hernandez@hhs.texas.gov

1-1 910-59 1.00 LOT 2000.00000 \$2,000.00 09/01/2023

FY24 SERVICES PEST EXTERMINATING CH3 CCSSLC GROUP HOME CASTLE RIVER RESIDENTS

Schedule Total \$2,000.00

Item Total for Line 1 \$2,000.00

Hernandez, Natalee

Extended Amt

Due Date

PO Price

Health and Human Services Commission

Purchase Order

Ship Via

Payment Terms

Freight Terms

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All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number. Vendor: 1742908206 2 PEST PATROL INC PO BOX 270777 CORPUS CHRISTI TX 784270777 United States Fax: 979/277-1865 712Accounting@hhs. United States Fax: 979/277-1865 712Accounting@hhs. Line-Sch Inventory Item ID - Line Description Class/Item Quantity UOM PO Price 2-1 FY24 SERVICES PEST EXTERMINATING CH3 CCSSLC GROUP HOME RIVER FOREST RESIDENTS	HSTX-4-0000324397
Vendor: 1742908206 2 PEST PATROL INC PO BOX 270777 CORPUS CHRISTI TX 784270777 United States Fax: 979/277-1865 Fmail: 712Accounting@hhs. Purchaser: Hernandez,Natalee Line-Sch Inventory Item ID - Line Description Class/Item Quantity UOM PO Price 2-1 PY24 SERVICES PEST EXTERMINATING CH3 CCSSLC GROUP HOME RIVER FOREST RESIDENTS Bill To: Invoice - DADS HEALTH & HUMAI 4001 Highway 36 So Brenham TX 77833 United States Purchaser: Hernandez,Natalee Line-Sch Inventory Item ID - Line Description Class/Item Quantity UOM PO Price	N SERVICES COMMISSION
Purchaser: Hernandez,Natalee Line-Sch Inventory Item ID - Line Description Class/Item Quantity UOM PO Price 2-1 910-59 1.00 LOT 2000.00000 FY24 SERVICES PEST EXTERMINATING CH3 CCSSLC GROUP HOME RIVER FOREST RESIDENTS	N SERVICES COMMISSION uth
Line-Sch Inventory Item ID - Line Description Class/Item Quantity UOM PO Price 2-1 910-59 1.00 LOT 2000.00000 FY24 SERVICES PEST EXTERMINATING CH3 CCSSLC GROUP HOME RIVER FOREST RESIDENTS	texas.gov
2-1 910-59 1.00 LOT 2000.00000 FY24 SERVICES PEST EXTERMINATING CH3 CCSSLC GROUP HOME RIVER FOREST RESIDENTS	
FY24 SERVICES PEST EXTERMINATING CH3 CCSSLC GROUP HOME RIVER FOREST RESIDENTS	Extended Amt Due Date
	\$2,000.00 09/01/2023
Schedule Total	\$2,000.00
Item Total for Line 2	\$2,000.00

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	
Matalee Hemandy, CTCD, CTCM	
17 31 (30 11311 4116/3), 0100/10101	08/03/2023

\$4,000.00

Total PO Amount