

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-4-0000325652
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.			Date 09/01/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
			Ship To: 5950 - El Paso:6700 Delta Dr HEALTH & HUMAN SERVICES COMMISSION 6700 Delta Dr 6700 Delta Dr El Paso TX 79905 United States

Vendor: 1350257090 9
CUMMINS INC
PO BOX 912138
DENVER CO 80291-2138
United States

Bill To: Invoice - DADS
HEALTH & HUMAN SERVICES COMMISSION
2501 Maple St
PO Box 451
Abilene TX 79602
United States

Fax: 325/795-3807
Email: 710Accounting@hhsc.state.tx.us

Purchaser: Ybarra,Diego

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY24 funding
SP/E
Requisition 0000229741 - Pricing per Quote 192996
Customer ID: 468315
PO Service Dates 09/01/2023 to 08/31/2024

Attached Terms and Conditions apply to this Purchase Order.

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.

VENDORS EMAIL INVOICES TO: dshs.tshbusinessoffice@dshs.texas.gov
PO BILL TO INFORMATION
Terrell State Hospital
P.O. Box 70
1200 East Brin Street
Terrell, Texas 74160
CODE # 3072

Vendor contact
Fernado Cruz,
(915) 996-8533
F.Cruz@cummins
and/or
Corey Bryant
(817) 733-2054
Corey.G.Bryant@cummins.com

Agency contact
Jackson Williams
(915) 534-5526
Williams.Jackson@hhsc.state.tx.us

PCS contact
Diego Ybarra, CTCD
(512) 406-2480
Diego.Ybarra01@hhs.texas.gov

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Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
1-1	FY 24 Service/ Cummins Inspection/Full load bank	936-39	1.00	LOT	3776.91000	\$3,776.91	09/01/2023
Schedule Total						\$3,776.91	
Item Total for Line 1						\$3,776.91	
Total PO Amount						\$3,776.91	

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



08/12/2023