## **Department of State Health Services**

## **Purchase Order**

**Dispatch via Print** 

Payment Ter	rms Freight Terms	Ship Via		11110TV 4 000000		
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-4-000032	<i>5//</i> 1	
	by informal bid, Invitation for Offer, or R s, terms, and conditions set forth in the ad		Date 09/01/23	Revision	Page 1	
conforming r guarantees go requirements All shipment	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.			1899 - Lubbock:6302 Iola Ave HEALTH & HUMAN SERVICES COMMISSION 6302 Iola Ave Lubbock TX 79424 United States		
Vendor:	1751915482 1 DIAMOND BUSINESS SERVICES 723 SW 7TH AVE USA AMARILLO TX 79101-2109 United States			Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICE 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	ERVICES	
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov		

Quantity

FY24 funding IT/D Requisition 225762 PO Service Dates 09-01-2023 to 02-29-2024

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 VID 1751915482 Kent Melinsky 806-373-4148 kent@diamondbusiness.net

Line-Sch

Agency contact Lori Dye 806-783-6474 Lori.Dye@dshs.texas.gov Lubbock DSHS

PCS contact Steve Ruiz, CTCD 512-776-2106 steve.ruiz@hhs.texas.gov

1-1 208-27 6.00 MOS 50.00000 \$300.00 09/01/2023

BadgePass ONE Base Monthly Subscription: September 2023 to February 2024, Amarillo/Lubbock DSHS Office Locations

Schedule Total	\$300.00
Item Total for Line 1	\$300.00

Ruiz,Steve

**Extended Amt** 

**Due Date** 

PO Price

**Purchaser:** 

**UOM** 

## **Department of State Health Services**

## **Purchase Order**

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Net 30	rms Freight Terms Prepaid & Allow	Ship V BEST		Purchase Order		<b>HHSTX-4-00</b>	000325771
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 2		
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Vendor:	1751915482 1 DIAMOND BUSINESS SERVICES INC 723 SW 7TH AVE USA AMARILLO TX 79101-2109 United States			Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICE 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States		I SERVICES
				Fax: Email:	512/458-7442 invoices@dshs.te:	xas.gov	
	Inventory Item ID - Line Description	Class/Item	Ouantity	Purchaser: UOM	Ruiz,Steve PO Price	Extended Amt	Due Date

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

Literation, CTCD

Total PO Amount

08/14/2023

\$300.00