

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-4-0000325936
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: 6563 - Abilene:2501 Maple St HEALTH & HUMAN SERVICES COMMISSION 2501 Maple St 2501 Maple St Abilene TX 79602 United States

Vendor: 1362604143 1
BAXTER HEALTH CARE CORPORATION
PO BOX 730531
DALLAS TX 753730531
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: Klekar,Dorian Nogueira

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

This Purchase order is contingent upon the availability of lawful appropriations by the Texas Legislature and may be cancelled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those actually ordered and received by the agency. Any funds not utilized by 08/31/2024 are automatically cancelled.

BLANKET PURCHASE ORDER

TERM: September 1, 2023, through August 31, 2024

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

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

DELIVERY: 14 Days After Receipt of PO

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday - Friday except designated State Holidays when the Warehouse is closed.

Please call Agency Delivery Contact to schedule delivery 24 hours prior to arrival.

AGENCY CONTACT:
Tammy Duncan
+1 (325) 692-4053
tammy.duncan@hhs.texas.gov

Ship to Attn: Tammy Duncan

HHSC BUYER:
Dorian Klekar
(512) 776-2991
dorian.klekar@hhs.texas.gov

VENDOR:
BAXTER HEALTH CARE CORPORATION
Dean Stoeber 224.948.6139
dean_stoeber@baxter.com

Contract: PP-OR-2056 Expiration: 6/30/2025

PURCHASING METHOD: EX-0
Purchase made under the Authority of Texas Government Code 2155.144 for goods or services acquired for the benefit or on behalf of clients of programs operated by the agency.

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-4-0000325936
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 2
			Ship To: 6563 - Abilene:2501 Maple St HEALTH & HUMAN SERVICES COMMISSION 2501 Maple St 2501 Maple St Abilene TX 79602 United States

Vendor: 1362604143 1
BAXTER HEALTH CARE CORPORATION
PO BOX 730531
DALLAS TX 753730531
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: Klekar,Dorian Nogueira

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

REQUIREMENTS/LIMITATIONS:

Quantities may be increased or decreased upon need during the term of the PO. The quantities shown are estimates only and do not constitute a guarantee of purchase. Any quantities not ordered and received by August 31, 2024, will be considered cancelled.

Goods and/or services are to be delivered and invoiced after September 1, 2023.

FY24 Funding
This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature.

Invoice per 34 TAC §20.487, amended effective May 1, 2022

Requisition # 0000230203

(Include for 1 Lot POs)

Note: Agency will not order products on this PO that are available from WorkQuest, Texas Correctional Industries or DIR. Agency will not order capital or controlled assets on this PO.

1-1	FY24 MEDICAL BED PARTS	410-03	1.00	LOT	10000.00000	\$10,000.00	09/01/2023
Schedule Total						\$10,000.00	
Item Total for Line 1						\$10,000.00	
Total PO Amount						\$10,000.00	

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.

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-4-0000325936
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 3
		Ship To:	6563 - Abilene:2501 Maple St HEALTH & HUMAN SERVICES COMMISSION 2501 Maple St 2501 Maple St Abilene TX 79602 United States

Vendor: 1362604143 1
BAXTER HEALTH CARE CORPORATION
PO BOX 730531
DALLAS TX 753730531
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: Klekar, Dorian Nogueira

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

Authorized By

Dorian Klekar, CTCD

08/15/2023