

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms N/A, Service, Pick up, etc.	Ship Via NONE	Purchase Order HHSTX-4-0000326298
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: 5059 - Kerrville:721 Thompson Dr HEALTH & HUMAN SERVICES COMMISSION 721 Thompson Dr Kerrville TX 78028 United States

Vendor: 1741768107 3
ROGER G MOBLAD
224 WESLEY DR
KERRVILLE TX 780285809
United States

Bill To: Invoice-DSHS Accounts Payable
HEALTH & HUMAN SERVICES COMMISSION
6711 S New Braunfels
Ste 100
San Antonio TX 78223
United States

Fax: 210/531-7883
Email: SAHAccounting@dshs.texas.gov

Purchaser: Atchley,Cindy Jean 432/263-9617

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY24 Funding
EX/0 Legal Cite TGC 2155.144(b)(b-1) (2) Client Purchase
PO must not exceed \$5,000.00.
Requisition 0000235099; Pricing per quote dated 8/17/2023.
Rate: Current Medicaid/Medicare approved rates/See Quote

PO Service Dates: 09/01/2023-08/31/2024 with no renewals

Client Medical Services as needed:
Podiatry Services

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

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 and/or 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:
Dr. Roger Moblad
830-257-7677
rmoblad@windstream.net

For: Agency/Facility: HHSC/Kerrville State Hospital (KSH)

Agency Contact:
Chante Owens
210-531-7943
chante.owens1@hhs.texas.gov

PCS Contact:
Cindy Atchley, CTCD
Phone: 432-263-9617
Email: cindy.atchley@hhs.texas.gov

1-1	FY24 Client Medical Services as needed; Podiatry Services; Dr. Roger Moblad;	948-74	1.00	LOT	5000.00000	\$5,000.00	09/01/2023
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Req 235099

Schedule Total \$5,000.00

**Vendor SEND INVOICES VIA EMAIL TO: sahaccounting@dshs.texas.gov

Item Total for Line 1 \$5,000.00

Total PO Amount \$5,000.00

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 <i>Cindy Atchley, CTCD</i>	08/17/2023
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