

# Health and Human Services Commission

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-4-0000326440</b>
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.			<b>Date</b> 09/01/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> Page 1
			<b>Ship To:</b> 4514 - Waco:3501 N 19th St DEPARTMENT OF STATE HEALTH SERVICES 3501 N 19th St Waco TX 76708 United States

**Vendor:** 1432117807 2  
ROADRUNNER RADIOLOGY EQUIPMENT LLC  
704 HIGHWAY 71 W STE C300  
BASTROP TX 78602  
United States

**Bill To:** Invoice - DADS  
HEALTH & HUMAN SERVICES COMMISSION  
424 Mesquite Dr  
PO Box 1132  
Mexia TX 76667  
United States

**Fax:** 254/562-1894  
**Email:** 718Accounting@hhs.texas.gov

**Purchaser:** Griffin,Valerie 512/406-2458

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 2155.144 Client Purchase

PO must not exceed \$10,000.00

Requisition: 0000231748

Pricing per email dated April 8, 2023

PO Service Dates: 09-01-2023 to 08-31-2024

Services to be performed: Portable Radiology Services

ATTN VENDOR: PLEASE SEND INVOICES VIA EMAIL TO 718Accounting@hhs.texas.gov

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.

**Vendor Contact**  
Joni Jack  
979-557-6517  
Joni@roadrunnerradiology.com

**Agency Contact**  
Clarice Joann Cooper  
254-745-5192  
Clarice.Cooper1@hhs.texas.gov

**Contract Manager**  
Valerie Cashner  
254-562-1389  
Valerie.Cashner2@hhs.texas.gov  
Facility: Waco Center for Youth

**PCS Contact**  
Valerie Griffin  
512-406-2458

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Valerie.Griffin@hhs.texas.gov

1-1	FY24 Portable Radiology Services for Waco Center for Youth.	948-97	1.00	LOT	5000.00000	\$5,000.00	09/01/2023
	Pricing: \$225 per X-ray CPT code						

**Schedule Total** \_\_\_\_\_ \$5,000.00  
**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.

<b>Authorized By</b> <i>Valerie Griffin, CTCO, CTCM</i>	<b>08/19/2023</b>
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