Health and Human Services Commission

Purchase Order

					Dispa	tch via Prir
Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order		HHSTX-4-00	00032688
If advertised by inform	nal bid, Invitation for Offer, or I	Request for Proposal; all	Date 09/01/23	Revision		Pag
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. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.		Ship To:	5009 - Vernon:4730 College Dr HEALTH & HUMAN SERVICES COMMISSION 4730 College Dr PO Box 2231 Vernon TX 76385 United States			
Vendor: 1250900465 6 TRANE US INC PO BOX 845053 DALLAS TX 752845053 United States			Bill To:	Terrell SH Whse HEALTH & HUMAN SERVICES COMMI 1200 E Brin PO Box 70 Terrell TX 75160 United States		OMMISSION
			Email:	DSHS.TSHBusin	essOffice@dshs.texa	s.gov
			Purchaser:	Farris,Lilly K	51	2/406-2452
Line-Sch Invento	ory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
SHIPPING INSTRU		2024 I notified by Agency Contact.				
	vs After Receipt of PO					
AGENCY CONTAC Name: Shannon Giv Facility: North Texa: Phone: 940-552-410	T/SHIPPING INFO: /ens s State Hospital, Vernon Can	-4:30 PM Monday Friday exce	pt designated State H	olidays		
HHSC BUYER: Name: Lilly Farris C Phone: 512-406-24 Email: lilly.farris@hl	52					
VENDOR: Name: Trane US In Contact: William Me Phone: 214-683-62: Email: William.men Email: mesquite@tr	endenhall 25 or 855-303-7069 denhall@trane.com					
FREIGHT: F.O.B. D	estination Freight Prepaid ar	d Allowed				
OMNIA GPO and H	HSC Contract # HHS000840	200001				
OMNIA GPO and T	rane US Inc Contract #3341					
PURCHASING MET	THOD: EX-0					

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Te Net 30	erms	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchasa Ordar		HHSTX-4-0	000326880	
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				Email:	DSHS.TSHBusin	nessOffice@dshs.texa	as.gov	
				Purchaser:	Farris,Lilly K	5	12/406-2452	
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	made und	ry Item ID - Line Description er the Authority of Texas Gover es are to be delivered and invoi		UOM r Health Care Purchas	PO Price	Extended Amt		
Purchase n Goods and, Any goods Amount ma This PO is a Invoice per Note: Agen	nade unde l/or service or service ay be incre contingen · 34 TAC § ncy will no	er the Authority of Texas Gover	nment Code 2155.1441 fo ced after September 1, 20 August 31, 2024, will be co y of lawful appropriations b y 1, 2022 s PO that are available from	UOM r Health Care Purchas 23. onsidered cancelled. y the Texas Legislatur	PO Price ing including grou e. FY2024 fundin	up purchasing prog	rams.	
Purchase n Goods and, Any goods Amount ma This PO is a Invoice per Note: Agen	nade unde l/or service ay be incre contingen 34 TAC § ncy will no ontrolled a FY24 Bl Supplies	er the Authority of Texas Gover es are to be delivered and invoi es not ordered and received by eased/decreased upon need. It upon the continued availability §20.487, amended effective Ma t order goods or services on thi assets or equipment on this PO	nment Code 2155.1441 fo ced after September 1, 20 August 31, 2024, will be co y of lawful appropriations b y 1, 2022 s PO that are available from	UOM r Health Care Purchas 23. onsidered cancelled. y the Texas Legislatur m WorkQuest, Texas C	PO Price ing including grou e. FY2024 fundin	up purchasing prog	rams.	
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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.

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Line-Sch Inv	ventory Item ID - Line Description	Class/Item Qu	antity UOM	PO Price	Extended Amt Due Date

Authorized By Lilly Lania, CTCD <u>08/24/2023</u>