

# 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-4-0000328264</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> 09/11/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> <b>Page</b> 1
			<b>Ship To:</b> 5950 - El Paso:6700 Delta Dr HEALTH & HUMAN SERVICES COMMISSION 6700 Delta Dr 6700 Delta Dr El Paso TX 79905 United States

**Vendor:** 1742748374 2  
PROACTION INC  
PO BOX 962505  
EL PASO TX 799962505  
United States

**Bill To:** Invoice-DSHS Accounts Payable  
DEPARTMENT OF STATE HEALTH SERVICES  
1200 E Brin  
PO Box 70  
Terrell TX 75160  
United States

**Fax:** 972/551-8052  
**Email:** DSHS.TSHBusinessOffice@dshs.texas.gov

**Purchaser:** Wilson, Madison Faith

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

**BLANKET PURCHASE ORDER**

TERM: September 1, 2023 through August 31, 2024  
 SHIPPING INSTRUCTIONS: DO NOT SHIP until notified by Agency Contact.  
 FREIGHT: F.O.B. Destination Freight Prepaid Allowed  
 DELIVERY: DO NOT SHIP until notified by Agency Contact.  
 Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday Friday except designated State Holidays

**AGENCY CONTACT:**  
 Pricilla Lara  
 915-782-6442  
 Pricilla.lara@hhs.texas.gov  
 Ship to Attn: Pricilla Lara  
 6700 Delta Dr  
 El Paso, TX 79905

**HHSC BUYER:**  
 Madison Wilson  
 254-744-4512  
 Madison.wilson@hhs.texas.gov

**VENDOR:**  
 Proaction Inc.  
 Michelle Luevano  
 915-532-2771  
 MLUEVANO@PROACTION.ORG

**PURCHASING METHOD:** SP/E  
 Purchase not to exceed \$10,000.00. Rule 34 Texas Administrative Code § 20.41 - Delegated Purchases

**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, 2023  
 Requisition 0000228904  
 (Include for 1 Lot POs)

# 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-4-0000328264</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> 09/11/23
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> Page 2
			<b>Ship To:</b> 5950 - El Paso:6700 Delta Dr HEALTH & HUMAN SERVICES COMMISSION 6700 Delta Dr 6700 Delta Dr El Paso TX 79905 United States

**Vendor:** 1742748374 2  
PROACTION INC  
PO BOX 962505  
EL PASO TX 799962505  
United States

**Bill To:** Invoice-DSHS Accounts Payable  
DEPARTMENT OF STATE HEALTH SERVICES  
1200 E Brin  
PO Box 70  
Terrell TX 75160  
United States

**Fax:** 972/551-8052  
**Email:** DSHS.TSHBusinessOffice@dshs.texas.gov

**Purchaser:** Wilson, Madison Faith

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

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	GOODS, FY24- BLANKET PO TO PURCHASE HEARTSAVER CPR CARDS AND HEALTHCARE PROVIDER CPR CARDS FOR CH5 (EPSSLC) FROM PROACTION	785-87	1.00	LOT	4999.00000	\$4,999.00	09/11/2023
-----	--	--------	------	-----	------------	------------	------------

**Schedule Total**                     \$4,999.00

**Item Total for Line 1**                     \$4,999.00

**Total PO Amount** \$4,999.00

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**

*Madison Wilson, CTCD*

**09/11/2023**