## **Health and Human Services Commission**

## **Purchase Order**

					Dispatch via Print		
Payment Te Net 30	rms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Orde	er	HHSTX-4-0000328642		
specification	by informal bid, Invitation for Offer, or R s, terms, and conditions set forth in the ad	vertisement and vendor's	<b>Date</b> 09/18/23	Revision	Revision Pag		
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.			Smp 10:	5059 - Kerrville:721 Thompson Dr HEALTH & HUMAN SERVICES COMMISSION 721 Thompson Dr Kerrville TX 78028 United States			
Vendor:	1363684738 9 ULINE INC PO BOX 88741 CHICAGO IL 606801741 <b>United States</b>		Bill To:	Invoice-DSHS Accounts Payable HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States			
			Fax: Email:	210/531-7883 SAHAccounting@dshs.texas.gov			
			Purchaser:	Ogle,Tracie L			
Line-Sch	Inventory Item ID - Line Description	Class/Item Qua	ntity UOM	PO Price	Extended Amt Due Date		

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

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

DELIVERY: 7 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

AGENCY CONTACT: Kerrville SH PAUL RAMIREZ IS THE LEAD ON THIS REQUISITION 830-896-2211 X 6218 TRACY LISENBY IS THE REQUESTOR 830-896-2211 X 6620

PLEASE DELIVER TO 578 KITCHEN

HHSC BUYER: Tracie Ogle, CTCD 512-776-2326 Tracie.Ogle@hhs.texas.gov

VENDOR: Uline Tel #800/295-5510 Email: customer.service@uline.com

PURCHASING METHOD: SP/E Not to Exceed \$10,000.00

REQUIREMENTS/LIMITATIONS: This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2024 funding.

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

Requisition: 0000241309

GENERAL PURPOSE MASKING TAPE 2"X60 YARDS, 24/CASE MODEL NO# S-6540 832-52

72.00 ROL

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			Fax: Email:	210/531-7883 SAHAccounting@dshs.texas.gov Ogle,Tracie L			
			Purchaser:				
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date	
			Sche	Schedule Total \$525.60			
			Item Total for Line 1 \$525.60   Total PO Amount \$525.60				
					\$525.60		

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

Iracie Dak, CTCD

<u>09/18/2023</u>