Health and Human Services Commission

Purchase Order

Dispatch via Print

| Payment Terms | s Freight Terms | Ship Via | | | |
|--|---|----------------------------|---|---|--------------|
| Net 30 | Prepaid & Allow | BEST WAY | Purchase Order | HHSTX-4 | -0000328644 |
| 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. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number. | | | Date 09/18/23 | Revision | Page 1 |
| | | | Ship To: | 5035 - Rusk:805 N Dickinson Dr HEALTH & HUMAN SERVICES COMMISSION 805 N Dickinson Dr PO Box 318 Rusk TX 75785 | |
| Vendor: | 1390380010 3 JOHNSON CONTROLS INC PO BOX 93107 CHICAGO IL 606733107 United States | | J United States Bill To: Invoice - DADS HEALTH & HUMAN SERVICE 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States 1000000000000000000000000000000000000 | | S COMMISSION |
| | | | Fax: Email: | 254/562-1894 718Accounting@hhs.texas.gov | |
| | | | Dunchogon | Gomez, Hadassah-Natalia | |
| Line-Sch In | ventory Item ID - Line Description | Class/Item Quantity | Purchaser: UOM | PO Price Extended A | mt Due Date |
| Phone: 903-68 Email: Edward Contract Mana Phone: 903-68 | ency Contact: Edward Thornton 33-3421 I.thornton@hhs.texas.gov ger (for SCOR): Jerry McClure | | | | |
| | ND INVOICES VIA EMAIL TO **71 | 8Accounting@hhs.texas.gov* | * | | |
| 512-406-2466 | : nez, CTCD, CTCM nez@hhs.texas.gov | | | | |
| Building Techn Johnson Contr Phone: 1 469 5 | 103 Rep Dallas/Fort-Worth ologies Services (Fire HVAC Se | | | | |
| | nd HHS Contract # HHS000840200 | | | | |
| | nd Johnson Controls Contract # R2 | 00402 | | | |
| | METHOD: EX/0 e under the Authority of Texas Gove | ernment Code 2155.1441 for | Health Care Purchasi | ng including group purchasing p | rograms. |

REQUIREMENTS/LIMITATIONS:

Health and Human Services Commission

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|--|--|---------------------|----------------------|---|--|
| Net 30 | Prepaid & Allow | BEST WAY | Purchase Order | | HHSTX-4-0000328644 |
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| | | | Ship To: | HEALTH & 805 N Dick PO Box 31 Rusk TX 7 | 5035 - Rusk:805 N Dickinson Dr HEALTH & HUMAN SERVICES COMMISSION 805 N Dickinson Dr PO Box 318 Rusk TX 75785 United States |
| Vendor: | 1390380010 3 JOHNSON CONTROLS INC PO BOX 93107 CHICAGO IL 606733107 United States | | Bill To: | Invoice - DADS HEALTH & HUMAN SERVICES COMMISSION 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States | |
| | | | Fax: Email: | 254/562-18 718Accour | 394 nting@hhs.texas.gov |
| | | | Purchaser: | , | adassah-Natalia |
| Line-Sch | Inventory Item ID - Line Description | Class/Item Quantity | UOM | PO Price | Extended Amt Due Date |
| · | 34 TAC §20.487, amended effective May 0000239977 | | LOT 21 | 000.00000 | \$21,000.00 09/18/2023 |
| 1-1 | FY24 (Service) - Access Control System (BAS-Building Automation System) monitoring/maintenance/repairs, service requests as needed. | | | | |
| | | | Sche | dule Total | \$21,000.00 |
| | | | Item Total | for Line 1 | \$21,000.00 |
| | | | Total P | O Amount | \$21,000.00 |

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.

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Dispatch via Print Payment Terms Freight Terms Ship Via HHSTX-4-0000328644 Net 30 Prepaid & Allow BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Revision Page Date specifications, terms, and conditions set forth in the advertisement and vendor's 09/18/23 3 conforming responses become a part of this numbered purchase order. Contractor 5035 - Rusk:805 N Dickinson Dr Ship To: guarantees goods or services delivered meet or exceed numbered purchase order HEALTH & HUMAN SERVICES COMMISSION requirements. 805 N Dickinson Dr All shipments, shipping papers, invoices, and correspondence must be identified PO Box 318 with our Purchase Order Number. Rusk TX 75785 United States 13903800103 Vendor: Bill To: Invoice - DADS JOHNSON CONTROLS INC HEALTH & HUMAN SERVICES COMMISSION PO BOX 93107 424 Mesquite Dr PO Box 1132 CHICAGO IL 606733107 Mexia TX 76667 **United States** United States 254/562-1894 Fax: Email: 718Accounting@hhs.texas.gov Gomez, Hadassah-Natalia **Purchaser:** Line-Sch **Inventory Item ID - Line Description** Class/Item PO Price Extended Amt Quantity UOM Due Date

> Authorized By Hadassach Stoney, CTCD, CTCM 09/18/2023