Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via			10=1/ / 00000000	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HH	HSTX-4-0000328912	
If advertised by informal bid, Invitation for Offer, or Request for Proposal; all specifications, terms, and conditions set forth in the advertisement and Center of the conditions of the condi			Date 09/22/23	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.		Ship To:	0293 - Beaumont: 1090 S 4th St HEALTH & HUMAN SERVICES COMMISSION 1090 S 4th St			
All shipments, ship with our Purchase	ping papers, invoices, and corr Order Number.	espondence must be identified		Beaumont TX 77701 United States		
V 165	0020075 0		D:II T	Invoice HHICC Dec 05	. Administ	

Vendor: 1650830075 9

MORNING STAR INDUSTRIES

PO BOX 1266

JENSEN BEACH FL 349581266

United States

Bill To: Invoice-HHSC Reg 05; Administ

HEALTH & HUMAN SERVICES COMMISSION

350 Pine St Flr 9 Beaumont TX 77701 United States

Fax: 409/951-3209

Email: Reg05_Admin_Services@hhsc.state.tx.us

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

FY24 Purchase / Requisition # 242702

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

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

DELIVERY: 14 Days After Receipt of PO

Delivery hours are from 8:00 AM -Noon and 1:00-5:00 PM Monday - Friday except designated State Holidays

SMARTBUY PO # 24008583

Confirmation Order - Do Not Duplicate

Agency Delivery Contact: Laura Kvarme @ 409-812-2703 Laura.Kvarme@hhs.texas.gov -or-LeTony Hadnot @ 409-730-4015 Letony.Hadnot@hhs.texas.gov

Purchaser Information:

Linda Rodriguez @ 512-406-2533 Linda.Rodriguez3@hhs.texas.gov

Vendor Information: Morning Star Industries Brittny Bonawitz @ 800-440-6050 Brittny@morningstarusa.Com

Procurement Method: CP/X

Procurement methods were evaluated, and the best value is provided using the TXMAS contract.

Contract #: TXMAS-20-7301 Start Date: 8/1/2020 End Date: 12/15/2024

Requirements/Limitations:

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature.

INVOICING: Reg05_Admin_Services@hhsc.state.tx.us

(a) To receive payment, a contractor must submit an invoice to the state agency receiving the goods or services. The invoice should include, but is not limited to including:

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	shipping papers, invoices, and correstase Order Number.	pondence must be identified		Beaumont TX 77701 United States			
Vendor:	1650830075 9		Bill To:	Invoice-HHSC Reg 05; Ada	minist		

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JENSEN BEACH FL 349581266

United States

HEALTH & HUMAN SERVICES COMMISSION

350 Pine St Flr 9 Beaumont TX 77701 United States

Fax: 409/951-3209

Email: Reg05_Admin_Services@hhsc.state.tx.us

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

- (1) the contractor's mailing and e-mail (if applicable) address;
- (2) the contractor's telephone number;
- (3) the name and telephone number of a person designated by the contractor to answer questions regarding the invoice;
- (4) the state agency's name, agency number, and delivery address;
- (5) the state agency's purchase order number, if applicable;
- (6) the contract number or other reference number, if applicable,
- (7) a valid Texas identification number (TIN) issued by the comptroller;
- (8) a description of the goods or services, in sufficient detail to identify the order which relates to the invoice;
- (9) unit numbers corresponding to the amount of the invoice;
- (10) if submitting an invoice after receiving an assignment of a contract, the TIN of the original contractor and the TIN of the successor vendor;
- (11) other relevant information supporting and explaining the payment requested.

INCLUDE P.O. NUMBER ON INVOICES, PACKING SLIPS, CARTONS, PACKAGES, BUNDLES, ETC.

1-1	Part # 684000NIB0039 - Disinfectant Spray, Aerosol, Lysol Brand, Original Scent - R05	485-40	75.00	EA	10.95000	\$821.25	10/06/2023
					Schedule Total _	\$821.25	
					Item Total for Line 1	\$821.25	
2-1	Part # BWK454W75 - Disinfecting Wipes, 8 x 7, Fresh Scent, 75/canister, 6 canisters/carton - R05	345-94	40.00	CS	21.81000	\$872.40	10/06/2023
					Schedule Total _	\$872.40	
					Item Total for Line 2	\$872.40	
					Total PO Amount	\$1,693.65	

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Payment To Net 30	erms Freight Terms Prepaid & Allow	Ship V BEST		Purchase Order	HI	HSTX-4-00	00328912
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			Ship To:	0293 - Beaumont:1090 S 4th St HEALTH & HUMAN SERVICES COMMISSION 1090 S 4th St Beaumont TX 77701 United States			
Vendor:	1650830075 9 MORNING STAR INDUSTRIES PO BOX 1266 JENSEN BEACH FL 349581266 United States			Bill To:	Invoice-HHSC Reg 05; Administ HEALTH & HUMAN SERVICES COMMIS 350 Pine St Flr 9 Beaumont TX 77701 United States		MMISSION
				Fax: Email:	409/951-3209 Reg05_Admin_Service	ces@hhsc.state.tx.	us
				Purchaser:	Rodriguez,Ermelind	-	2/406-2533
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date

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

finda Rodriguez, CTCD, CTCM

09/22/2023