Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via
Net 30	Prepaid & Allow	BEST WAY

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.

Purchase Order **HHSTX-4-0000329339**

Date	Revision	Page
09/28/23		1

Ship To: 2203 - Big Spring:1901 N Highway 8
HEALTH & HUMAN SERVICES COMMISSION
1901 N Highway 87
Big Spring TX 79720
United States

Vendor: 1453328644 0
AMAZON CAPITAL SERVICES INC
PO BOX 35184
SEATTLE WA 981245185
United States

Bill To: Invoice - DADS
HEALTH & HUMAN SERVICES COMMISSION
2501 Maple St
PO Box 451
Abilene TX 79602
United States

Fax: 325/795-3807
Email: 710Accounting@hhsc.state.tx.us

Purchaser: Connell,Ron Lee

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

FY24 General Goods

Spot Purchase Open Market
SP/E

Requisition #: HHSTX-4-0000243669

Requester Name: Norma Garcia
Phone #: +1 (432) 268-7644
Email: Norma.Garcia5@hhs.texas.gov

Lead Contact: Jessica Doporto, 432-268-7706, Jessica.doporto@hhs.texas.gov

Purchaser Name: Ron Connell
Phone #: 512-406-2666
Email: ron.connell@hhs.texas.gov

Vendor Name: AMAZON CAPITAL SERVICES INC
Contact: Customer Service
Phone #: 1-888-280-4331
Email: ar-businessworkbench@amazon.com

Goods and/or services are to be delivered and invoiced after September 1, 2023.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature CPA Procurement Manual, and may be cancelled at any time in whole or part without penalty.
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Invoicing and Payment: The invoice shall contain all the following in order to be considered for payment: PO number referenced, a unique invoice number, invoice date, and the total invoice amount. Each invoice shall also have an attached copy of the bill in order to be paid. Mail all original invoices to the BILL TO ADDRESS ON PO. Payment terms are net thirty days (30) unless a discount has been offered. Facility is not responsible for failure by the vendor to properly invoice which may delay payment processing.

1-1	VIVO 42-inch Desk Converter, K Series, Height Adjustable Sit to Stand Riser, Dual Monitor and Laptop Workstation with Wide Keyboard Tray, Black	425-83	1.00	EA	188.09000	$188.09	10/02/2023

Schedule Total $188.09

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Item Total for Line 1 $188.09

Total PO Amount $188.09

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

09/28/2023