

Health and Human Services Commission

Purchase Order

TX SmartBuy PO ID

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-4-0000329573
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.			Date 10/02/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 1 - 10/2/2023
			Page 1
			Ship To: 4549 - San Antonio:6711 S New Brau HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States

Vendor: 1061523665 9
ALADDIN TEMP-RITE LLC
PO BOX 8500-3431
PHILADELPHIA PA 191783431
United States

Bill To: Invoice-DSHS Accounts Payable
HEALTH & HUMAN SERVICES COMMISSION
6711 S New Braunfels
Ste 100
San Antonio TX 78223
United States

Fax: 210/531-7883
Email: SAHAccounting@dshs.texas.gov

Purchaser: Ogle, Tracie L

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FREIGHT: F.O.B Destination Freight Prepaid and Allowed
DELIVERY: 14 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 when the Warehouse is closed.
Please call Agency Delivery Contact to schedule delivery 24 hours prior to arrival.

AGENCY DELIVERY CONTACT:
San Antonio SH
Whse Supvr: Charles Garrison
PH: 210-531-7309
charles.garrison@hhs.texas.gov
Reg Mgr: Kris Viles

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

VENDOR:
Aladdin
PREMIER GPO and Aladdin Contract # PP-DI-1786
Aladdin Temp-Rite
Contact: Elaine Barch
Ph: 615-537-3745
Email orders@aladdin-atr.com
PREMIER GPO and HHS Contract # HHS000776400001 Exp 8/31/25

PURCHASING METHOD: EX-0
Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.
REQUIREMENTS/LIMITATIONS:
This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2024 funding.

Requisition # MIM2401795 Line(s) 15, 16, 17

1-1	240-66-80155-6 DISH DISP ENTREE 1 CAV 4M/CS ALADDIN A01A	240-66	78.00	CS	117.25000	\$9,145.50	10/16/2023
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Schedule Total \$9,145.50

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Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Item Total for Line 1						\$9,145.50	
2-1	240-66-80630-8 DISH DISP SIDE 1 CAV 4M/CS ALADDIN A05A	240-66	26.00	CS	127.70000	\$3,320.20	10/16/2023
Schedule Total						\$3,320.20	
Item Total for Line 2						\$3,320.20	
3-1	240-66-80710-8 DISH DISP SOUP BWL 1 CAV 1M/CS ALADDIN B24	240-66	44.00	CS	\$58.35	\$2,567.40	10/16/2023
Schedule Total						\$2,567.40	
Item Total for Line 3						\$2,567.40	
Total PO Amount						\$15,033.10	

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

Tracie Ogle, (FCD)

10/02/2023

