# Health and Human Services Commission

# Purchase Order

**TX SmartBuy PO ID** **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-4-0000330471**

| Date | Revision | Page |
|---|---|---|
| 10/11/23 | | 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:** 1113136595 6
HENRY SCHEIN INC
135 DURYEA RD
MELVILLE NY 117473834
**United States**

**Bill To:** Invoice-DSHS Accounts Payable
DEPARTMENT OF STATE HEALTH SERVICES
1901 N Highway 87
Big Spring TX 79720
United States

**Fax:** 432/268-7269
**Email:** bshaccounting@dshs.state.tx.us

**Purchaser:** Alvarez,Desiree C

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

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.

Please call Agency Delivery Contact to schedule delivery 24 hours prior to arrival.

AGENCY CONTACT:
Warehouse Supervisor: Anthony Salazar
(432) 268-7432
Fax: (432) 268-7299
anthony.salazar@hhs.texas.gov
Reg. Manager: Charles Barret

HHSC BUYER:
Desiree Alvarez, CTCD
(512) 776-2033
Email: Desiree.Alvarez@hhs.texas.gov

VENDOR:
Henry Schein
(800) 851-0400
Email: specialmarkets@henryschein.com

OMNIA GPO and HHSC Contract # HHS000840200001
OMNIA GPO and Henry Schein Contract # MMS 14034

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.

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

Requisition: MIM2401690 / LINE: 15

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| 1-1 | 652-85-00009-0<br>TOOTHPASTE TOTAL CLN MNT | 652-85 | 10.00 | CS | 15.60000 | $156.00 | 10/25/2023 |

# Health and Human Services Commission

## Purchase Order

**TX SmartBuy PO ID** **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-4-0000330471**

| Date | Revision | Page |
|---|---|---|
| 10/11/23 | | 2 |

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

**Vendor:** 1113136595 6
HENRY SCHEIN INC
135 DURYEA RD
MELVILLE NY 117473834
**United States**

**Bill To:** Invoice-DSHS Accounts Payable
DEPARTMENT OF STATE HEALTH SERVICES
1901 N Highway 87
Big Spring TX 79720
United States

**Fax:** 432/268-7269
**Email:** bshaccounting@dshs.state.tx.us

**Purchaser:** Alvarez,Desiree C

| Line-Sch | Inventory Item ID - Line Description | Class/Item | Quantity | UOM | PO Price | Extended Amt | Due Date |
|---|---|---|---|---|---|---|---|
| | 3.3OZ HSCHN 5430223 24/CS COLG | | | | | | |

| | |
|---|---|
| **Schedule Total** | $156.00 |
| **Item Total for Line 1** | $156.00 |
| **Total PO Amount** | $156.00 |

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.

**Authorized By**

Desiree Alvarez CTCD **10/11/2023**