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-4-0000333647**

Date	Revision	Page
11/20/23		1

Ship To: 4548 - Harlingen:1401 S Rangervill
HEALTH & HUMAN SERVICES COMMISSION
1401 S Rangerville Rd
Harlingen TX 78552
United States

Vendor: 1391455053 1
INPRO CORPORATION
PO BOX 720
MUSKEGO WI 531500720
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

Exempt Reason: N/A

Purchaser: Olvera,Marissa Ann

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

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

FREIGHT: F.O.B. Destination Freight Prepaid 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

AGENCY CONTACT:
Monica Oviedo Perales
(956)364-8226
Monica.OviedoPerales@hhs.texas.gov

Ship to Attn: Oviedo Perales, Monica

HHSC BUYER:
Marissa Olvera
512-776-3099
marissa.olvera1@hhs.texas.gov

VENDOR:
Inpro Corporation
S80 W 18766 Apollo Drive Remit to: PO Box 406
Muskego, WI 53150
Contact: Charles Flad
Contact Phone: 800-222-5556
Contact Email: Cflad@inprocorp.com

QUOTE : 01116868

PURCHASING METHOD: SP/E
Not to Exceed $10,000.00

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 #0000247437

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Fax: 210/531-7883
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Exempt Reason: N/A

Purchaser: Olvera,Marissa Ann

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
1-1	CZ-FULLCIRCLE Full Circle French Roast Tusk 60"w x 92"h incl 20"m VS w/ Full Circle French Roast	850-72	3.00	EA	162.39000	$487.17	12/11/2023
					Schedule Total	$487.17	
					Item Total for Line 1	$487.17	
2-1	CZ-FULLCIRCLE Full Circle French Roast Tusk 48"w x 92"h incl 20"m VS w/ Full Circle French Roast	850-72	2.00	EA	155.32000	$310.64	12/11/2023
					Schedule Total	$310.64	
					Item Total for Line 2	$310.64	
3-1	Shipping and Handling	962-86	1.00	EA	18.59000	$18.59	12/11/2023
					Schedule Total	$18.59	
					Item Total for Line 3	$18.59	
					Total PO Amount	$816.40	

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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Exempt Reason: N/A

Purchaser: Olvera,Marissa Ann

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

Authorized By

Marissa Olvera

11/27/2023