Department of State Health Services

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-4-0000334502**

Date	Revision	Page
12/06/23		1

Ship To: 1326 - Austin:1100 W 49th St (RDM)
DEPARTMENT OF STATE HEALTH SERVICES
1100 W 49th St (RDM)
PO Box 149347
Ste M550
Austin TX 78756
United States

Vendor: 1232882664 4
HEALTH CARE COMPLIANCE ASSOCIATION
6462 CITY WEST PKWY
EDEN PRAIRIE MN 55344-7731
United States

Bill To: Invoice-DSHS Fiscal Claims
DEPARTMENT OF STATE HEALTH SERVICES
1100 W 49th St (RBB)
PO Box 149347
Austin TX 78756
United States

Fax: 512/458-7442
Email: invoices@dshs.texas.gov

Exempt Reason: N/A

Purchaser: Augustus,Wendlyn Denett

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

FY24 funding
SP/E
Requisition 0000248716 Pricing per Quote 325.00
PO Service Dates 12-06-2023 to 8-31-2024

Attached Terms and Conditions apply to this Purchase Order.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty.
HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2024 are automatically canceled.

HCCA Membership for Employees Ann Duncan $325.00

Vendor Contact
1232882664
HEALTH CARE COMPLIANCE ASSOCIATION
+1 952.405.7900 helpteam@hcca-info.org
6462 City West Parkway Eden Prairie, MN 55344 USA

Agency contact
Ann Holt Duncan
512/776-6991
ann.duncan@dshs.texas.gov

PCS Contact
Wendlyn Augustus
wendlyn.augustus@hhs.texas.gov

1-1	FY24 HCCA Membership Renew - Ann Duncan	963-39	1.00	EA	325.00000	$325.00	12/06/2023

Schedule Total $325.00

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Purchaser: Augustus,Wendlyn Denett

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Item Total for Line 1 $325.00

Total PO Amount $325.00

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

Wendlyn Augustus, CTCD

12/06/2023