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-4-0000334536**

Date	Revision	Page
12/07/23		1

Ship To: 1495 - Austin:4601 W Guadalupe St
HEALTH & HUMAN SERVICES COMMISSION
4601 W Guadalupe St
PO Box 13247
Austin TX 78751
United States

Vendor: 1862161688 9
ODP BUSINESS SOLUTIONS LLC
PO BOX 660113
DALLAS TX 75266-0113
United States

Bill To: Invoice-HHSC Accounting
HEALTH & HUMAN SERVICES COMMISSION
4601 W Guadalupe St
Austin TX 78751
United States

Fax: 512/424-6901
Email: HHSC_AP@hhsc.state.tx.us

Exempt Reason: GPO

Purchaser: Connell,Ron Lee

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: 5-7 Business Days After Receipt of PO

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday thru Friday except designated State Holidays

SEND INVOICES VIA EMAIL TO: HHSC_AP@hhsc.state.tx.us

AGENCY REQUESTER:
Michael Estrada
512-466-6720
Michael.Estrada@hhs.texas.gov

SHIP TO ATTN: Timmi Black, 512-462-6251, Timmi.Black@hhs.texas.gov

HHSC BUYER:
Ron Connell, CTCD
512-406-2666
Ron.Connell@hhs.texas.gov

Vendor Name: ODP Business Solutions
Contact: Austin Igweike
Phone #: (512) 815-5530
Email: stateoftexas@odpbusiness.com / Austin.Igweike@odpbusiness.com

Omnia and Office Depot Contract Number # R190303
Omnia Office Depot HHS Account Number # 46319643

PURCHASING METHOD: EX/0

Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

Not to Exceed $50,000.00

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

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Exempt Reason: GPO

Purchaser: Connell,Ron Lee

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Requisition #0000249488							
1-1	Allsop, Ergoprene Gel Mouse Pad, Black, #671994	203-60	9.00	EA	13.26000	$119.34	12/13/2023
					Schedule Total	$119.34	
					Item Total for Line 1	$119.34	
2-1	Kensington Duo Gel Mouse Pad Wrist Rest, #365270	203-60	9.00	EA	18.99000	$170.91	12/13/2023
					Schedule Total	$170.91	
					Item Total for Line 2	$170.91	
					Total PO Amount	$290.25	

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 **12/08/2023**