## **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

**Extended Amt** Due Date

Payment Ter	ě .	Ship Via		11110	TV 4 0000005440	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	TX-4-0000335449	
If advertised by informal bid, Invitation for Offer, or Request for Proposal; all			Date	Revision Page		
specifications, terms, and conditions set forth in the advertisement and vendor's			12/20/23	1 - 12/21/2023		
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.			Ship To:	1725 - Houston:1320 E 40th St HEALTH & HUMAN SERVICES COMMISSION 1320 E 40th St PO Box 16017 Houston TX 77022 United States		
Vendor:	1650830075 9 MORNING STAR INDUSTRIES PO BOX 1266 JENSEN BEACH FL 349581266 <b>United States</b>		Bill To:	Invoice-HHSC Financial Service HEALTH & HUMAN SERVICES COMMISSION 5425 Polk St PO Box 16017 Ste 220 Houston TX 77023 United States		
			Fax: Email:	713/767-2488 Reg_06_Regional_Budget	_PRF@hhsc.state.tx	
Exempt Reas	on: N/A		Purchaser:	Alexander,Leslie L	512/406-2424	

Quantity

**UOM** 

PO Price

Class/Item

\*\*\*CONFIRMATION ORDER - DO NOT DUPLICATE\*\*\*

CONTINUENTION ONDER DO NOT BOT EIGHTE

**Inventory Item ID - Line Description** 

FY24 Purchase

Line-Sch

Texas Smart Buy Purchase Order #: 24054726

TXMAS-20-7301

Term: 08/01/2020 thru 12/15//2024

Renewal Options: 12/16/2024 thru 07/31/2025

Requisition #: 0000250590

INVOICING - See above for Bill to Information

See above for SHIP TO ADDRESS ON PO

AGENCY CONTACT:

Name: Patricia Basquez / 713-696-8020 Email: Patricia.Basquez@hhs.texas.gov

HHSC terms and conditions attached

Purchaser Information: Name: Leslie Alexander Phone #: 512-406-2424

Email Address: Leslie.Alexander@hhs.texas.gov

VENDOR INFORMATION:

VID: 16508300759

Contractor: Morning Star Industries, Inc. Contact Name: Brittny Bonawitz Email: Brittny@morningstarusa.Com

Phone: (800) 440-6050

Alternate Contact Name: Kelly Brill Alternate Email: kelly@morningstarusa.com

Freight Terms are FOB Destination Prepaid and Allowed/Add

Terms: Net 30

## **Health and Human Services Commission**

## **Purchase Order**

Ship Via

Payment Terms

Freight Terms

**Dispatch via Print** 

Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-4-0000335449		
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			Fax: Email:	713/767-2488 Reg_06_Regional_Budget_PRF@hhsc.state.tx		
Exempt Re	ason: N/A					2406 2424
Line-Sch	Inventory Item ID - Line Description	Class/Item Quant	Purchaser: tity UOM	Alexander,Leslie L PO Price	Extended Amt	2/406-2424 <b>Due Date</b>
	Manufacturer Part #: Cpc44571 - Antibacterial Hand Soap, Crisp Clean, 11 1/4 Oz. Pump Bottle, 6/Carton					
			Sch	edule Total	\$1,955.20	
			Item Total	for Line 1	\$1,955.20	
	22 2 1 can 2 can p 2 can c, o, can con					

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

Lastic Hand S, CTP

12/21/2023

\$1,955.20

Total PO Amount