

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-4-0000335840
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.			Date 01/02/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 2 - 1/4/2024
			Page 1
			Ship To: 5998 - Richmond:2100 Preston HEALTH & HUMAN SERVICES COMMISSION 2100 Preston Richmond TX 77469 United States

Vendor: 1263306955 9
 AVERY DENNISON RETAIL INFORMATION SERVIC
 PO BOX 8007
 SYRACUSE NY 132178007
 United States

Bill To: Invoice - DADS
 HEALTH & HUMAN SERVICES COMMISSION
 4001 Highway 36 South
 Brenham TX 77833
 United States

Fax: 979/277-1865
Email: 712Accounting@hhs.texas.gov

Exempt Reason: N/A

Purchaser: Connell,Ron Lee

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

FREIGHT: F.O.B. Destination Freight Prepaid and added to invoice. (Estimated UPS charges are \$40)

DELIVERY: 7 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 REQUESTER:
 Name: DIANA DOCKAL
 Phone: 281-344-4277
 Email address: DIANA.DOCKAL@HHS.TEXAS.GOV

SHIP TO ATTN: DIANA DOCKAL, 281-344-4277, DIANA.DOCKAL@HHS.TEXAS.GOV

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

Vendor Name: Avery Dennison Retail Information Services LLC
 Contact: AUSTIN FRANZEN
 Phone #: 800-252-6555,EXT 306
 Email: austin.franzen@averydennison.com / tpc-sales@averydennison.com
 Quote #121823JN

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

Delivery Days ARO
 Terms Net 30
 Shipping/Freight Terms FOB Destination Prepaid Add

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 #0000251039

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1-1	DR IHQ 1"x3.25" NoBrd Whit, Part # TC1032-01P with ink included, part # RB0425-15	832-55	1.00	LOT	387.83000	\$387.83	01/09/2024
Schedule Total						\$387.83	
Item Total for Line 1						\$387.83	
Total PO Amount						\$387.83	

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



01/04/2024