

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-4-0000336774
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 01/17/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 1 - 1/18/2024
			Page 1
			Ship To: 5030 - Terrell:1200 E Brin HEALTH & HUMAN SERVICES COMMISSION 1200 E Brin PO Box 70 Terrell TX 75160 United States

Vendor: 1750472210 3
LINDENMEYR MUNROE
PO BOX 841037
DALLAS TX 75284-1037
United States

Bill To: Terrell SH Whse
HEALTH & HUMAN SERVICES COMMISSION
1200 E Brin
PO Box 70
Terrell TX 75160
United States

Email: DSHS.TSHBusinessOffice@dshs.texas.gov

Exempt Reason: N/A

Purchaser: Alexander, Leslie L 512/406-2424

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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NOTE: VENDOR EMAIL INVOICE TO: DSHS.TSHBUSINESSOFFICE@DSHS.TEXAS.GOV

FY24 Purchase

Procurement Type: SP/E

Requisition #: 0000251910

See above for SHIP TO ADDRESS ON PO

Deliveries will be accepted Monday-Friday 8am-12pm / 1pm-5pm Central Time
except designated State Holidays when the Warehouse is closed.

Agency Contact:
Name: Kelsey Mitchell / 972-551-8288
Email: Kelsey.Mitchell@hhs.texas.gov

BUILDING: Warehouse
CONTACT: Kelsey Mitchell

HHSC terms and conditions attached.

HHSC PURCHASER:
Leslie Alexander, CTCD
512-406-2424
Leslie.Alexander@hhs.texas.gov

Vendor Information
VID: 1750472210
Vendor Name: Lindenmeyr Munroe Paper Company
Contact: Travis Gray
Phone #: 214-637-2220
Email: tgray@lindenmeyer.com

Quote #: 5N7GB/00 Date: 12/04/2023

Freight Terms are FOB Destination Prepaid and Allowed/Add
Terms: Net 30

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1-1	NCR Superior Reverse 3 Part\ NIGP CODE:64530\ITEM#0470.005900 \ PRINT SHOP	645-30	30.00	RM	17.25000	\$517.50	01/24/2024

Schedule Total \$517.50

Item Total for Line 1 \$517.50

Total PO Amount \$517.50

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



01/18/2024