

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-4-0000337290
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 01/25/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 1904 - San Antonio:2303 SE Militar DEPARTMENT OF STATE HEALTH SERVICES 2303 SE Military Dr San Antonio TX 78223 United States
			Page 1

Vendor: 1741834707 0
ACE MART RESTAURANT SUPPLY COMPANY
PO BOX 18100
SAN ANTONIO TX 782180100
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@hpsc.state.tx.us

Exempt Reason: CLIENT PURCHASES

Purchaser: Breest, Maria Ana

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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Note: Post Solicitation and Award to ESBD

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO

FREIGHT: F.O.B. Destination Freight Prepaid Allowed

DELIVERY: 14 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 CONTACT:

Ship to Attn: Julian Hernandez
Building Bldg 523
210.531.4558
Julian.Hernandez@dshs.texas.gov

HHSC BUYER:
Ana Breest CTCD, CTCM
512-406-2679
Ana.breest@hhs.texas.gov

VENDOR:1741834707
Ace Mart
210.323.4467
hgallipo@acemart.com

Formal IFB HHS0014321

PURCHASING METHOD: EX/0
Purchase made under the Authority of Texas Government Code 2155.144 for goods or services acquired for the benefit or on behalf of clients of programs operated by the agency.

Not to Exceed \$100,000 (when no HUB HSP Review)

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: 246877

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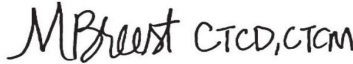
Purchaser: Breest, Maria Ana

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
1-1	Hobart Conveyor Type Commercial Dishwasher, Model No. CL44EN ₆ BAS+BUILDUP	165-29	1.00	EA	39547.46000	\$39,547.46	02/15/2024
Schedule Total						\$39,547.46	
Item Total for Line 1						\$39,547.46	
Total PO Amount						\$39,547.46	

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  M. Breest CTCD, CTM	02/01/2024
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