Department of State Health Services

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-4-0000338228**

Date	Revision	Page
02/07/24		1

Ship To: 1907 - Harlingen:601 W Sesame Dr
DEPARTMENT OF STATE HEALTH SERVICES
601 W Sesame Dr
Harlingen TX 78550
United States

Vendor: 1391837105 8
4IMPRINT INC
25303 NETWORK PL
CHICAGO IL 606731253
United States

Bill To: Invoice-DSHS Fiscal Claims
DEPARTMENT OF STATE HEALTH SERVICES
1100 W 49th St (RBB)
PO Box 149347
Austin TX 78756
United States

Fax: 512/458-7442
Email: invoices@dshs.texas.gov

Exempt Reason: N/A

Purchaser: Ogle,Tracie L

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date

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:
Belinda Garza
Belinda.Garza2dshs.texas.gov
956-421-5501

Fernando Castillo
Fernando.castillo@dshs.texa.gov
956-421-5512

HHSC BUYER:
Tracie Ogle, CTCD, CTCM
512-776-2326
Tracie.ogle@hhs.texas.gov

VENDOR:
Contact Info
4Imprint
JACKIE BUTLER
877-446-7746 ext. 8441
866-798-0076 Fax
jbutler@4imprint.com

QUOTE: 26378857

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

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

Requisition: 0000254420

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Exempt Reason: N/A

Purchaser: Ogle,Tracie L

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
1-1	Therm-O tote insulated grocery bag item. # 106542	037-52	500.00	EA	3.85300	$1,926.50	02/09/2024
					Schedule Total	$1,926.50	
					Item Total for Line 1	$1,926.50	
2-1	Translucent stadium cup with measurements- 12 oz 300 frost frost, 300 translucent blue, 400 translucent green	037-52	1000.00	EA	.49000	$490.00	02/09/2024
					Schedule Total	$490.00	
					Item Total for Line 2	$490.00	
3-1	Set up charge.	966-86	1.00	LOT	90.00000	$90.00	02/09/2024
					Schedule Total	$90.00	
					Item Total for Line 3	$90.00	
4-1	Freight	962-86	1.00	LOT	276.15000	$276.15	02/09/2024
					Schedule Total	$276.15	
					Item Total for Line 4	$276.15	
					Total PO Amount	$2,782.65	

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Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date

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

Tracie Ogle, CTCD

02/07/2024