### **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via			
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	H	IHSTX-4-0000340551
specifications, terms, conforming response guarantees goods or requirements.	rmal bid, Invitation for Offer, or, and conditions set forth in the ass become a part of this numbered services delivered meet or exceeding papers, invoices, and corrorder Number.	dvertisement and vendor's d purchase order. Contractor d numbered purchase order	Date 03/11/24 Ship To:	Revision 1 - 3/11/2024 0481 - Brownwood: HEALTH & HUMA 2400 Crockett Dr Ste 100 Brownwood TX 768 United States	N SERVICES COMMISSION
<b>VJ</b> 104	2200002 5		Du T.	Invesion HHICC Desi-	on 2/0. Commu

Vendor: 1942388882.5

QUADIENT INC ATTN LEASE QUOTES ADMINISTRATOR 478 WHEELERS FARMS RD MILFORD CT 064619105

**United States** 

Invoice-HHSC Region 2/9, Commu Bill To:

HEALTH & HUMAN SERVICES COMMISSION

4601 S 1st St PO Box 521 Abilene TX 79605 United States

Email: Reg02\_Admin\_Services@hhs.texas.gov

Exempt Reason: N/A

Purchaser: Wright, Byron Carl 512/406-2512 Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity **UOM** PO Price **Extended Amt** Due Date

SHIP TO: **HHSC** 2400 CROCKETT DR **STE 100** BROWNWOOD, TX 76801

BILL TO: **HHSC** ATTN: ACCOUNTS PAYABLE PO BOX 521 ABILENE, TX 79604

PLEASE SEND INVOICES TO REG02\_ADMIN\_SERVICES@HHS.TEXAS.GOV

**VENDOR CONTACT:** 

VID: 19423888825

Quadient Inc 478 Wheelers Farms RD Milford, CT 06461

Contact: Michael Resa; (512) 632-8922; m.resa@quadient.com

13 - HHSC-System Support Services

AGENCY CONTACT: BEVERLY SCHRAEDER PHONE: 325-795-5618 FAX: 325-795-5612

EMAIL: Beverly.schraeder@hhs.texas.gov

ENTERED BY: MARY GARCIA PHONE: 325-795-5516 FAX: 325-795-5612

EMAIL: mary.garcia3@hhs.texas.gov

FINANCIAL MANAGER: BETTY BROWN PHONE: 325-795-5512 FAX: 325-795-5612

EMAIL: betty.brown@hhs.texas.gov

PLEASE SEND A COPY OF COMPLETED PO TO BEVERLY SCHRAEDER AND MARY GARCIA

FY24 funding

CP/A - Term Contract 985-C1

Requisition 257769

### **Health and Human Services Commission**

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If advertised by info specifications, terms	rmal bid, Invitation for Offer, or Is, and conditions set forth in the ac	Request for Proposal; all dvertisement and vendor's	<b>Date</b> 03/11/24	<b>Revision</b> 1 - 3/11/2024	Page 2
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:	0481 - Brownwood:2400 Crockett Dr HEALTH & HUMAN SERVICES COMMISSION 2400 Crockett Dr Ste 100 Brownwood TX 76801 United States		
Vendor: 194	12388882 5		Bill To:	Invoice-HHSC Region	2/9 Commu

HEALTH & HUMAN SERVICES COMMISSION QUADIENT INC

ATTN LEASE QUOTES 4601 S 1st St ADMINISTRATOR PO Box 521 478 WHEELERS FARMS RD Abilene TX 79605 United States MILFORD CT 064619105

**United States** 

Email: Reg02\_Admin\_Services@hhs.texas.gov

Exempt Reason: N/A

Purchaser: Wright, Byron Carl 512/406-2512 Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity **UOM** PO Price **Extended Amt** Due Date

SmartBuy PO 24111013

Confirmation Order Do Not Duplicate

PO Service Dates 03/11/2024 to 08/31/2024 (contingent upon Contract 985-C1 renewal)

Goods and/or services are to be delivered and invoiced after September 1, 2023.

Install Address: 2400 CROCKETT DR, STE 100, Brownwood N21022629

1101 N Midland Dr, Midland N21022630 1328 OAKHURST, Wichita Falls N21022631

Equipment Detail: IX7 with dynamic scale and 30-pound scale

Lease Term: New payment: \$480.32 per month each

New 36-month lease: 5/1/24-4/30/27

State agency mail operations are governed by state statute and administrative rules. TGC Ann., Ch. 2176, Vernon 2000 Supp. (2006); 1 TAC Sec. 117.31 (2006); See also TGC Ann. Sec. 2113.103; General Appropriations Act, S.B. 1, 79th Leg., Art. Ix, Sec. 6.15 (2005).

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08/31/2024 are automatically canceled.

Vendor contact

Mike Resa (512) 632-8922 m.resa@quadient.com Agency contact

**BEVERLY SCHRAEDER** 

PHONE: 325-795-5618 FAX: 325-795-5612 EMAIL: Beverly.schraeder@hhs.texas.gov

PCS contact Byron Wright CTCD (512) 406-2512

Byron.Wright@hhs.texas.gov

# **Health and Human Services Commission**

## **Purchase Order**

**Dispatch via Print** 

Payment Te	rms Freight Terms	Ship Via		1111071/ 4	0000040554	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-4	-0000340551	
	by informal bid, Invitation for Offer, or F		Date	Revision	Page	
1	s, terms, and conditions set forth in the ad		03/11/24	1 - 3/11/2024	3	
guarantees go requirements All shipmen	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.			0481 - Brownwood:2400 Crocket HEALTH & HUMAN SERVICE: 2400 Crockett Dr Ste 100 Brownwood TX 76801 United States	HUMAN SERVICES COMMISSION ett Dr TX 76801	
Vendor:	1942388882 5 QUADIENT INC ATTN LEASE QUOTES ADMINISTRATOR 478 WHEELERS FARMS RD MILFORD CT 064619105 United States		Bill To:	Invoice-HHSC Region 2/9, Commu HEALTH & HUMAN SERVICES COMMISSION 4601 S 1st St PO Box 521 Abilene TX 79605 United States		
			Email:	Reg02_Admin_Services@hhs.texa	as.gov	

Exempt Reason: N/A

P	MD011 1 1/11			Purchaser:	Wright,Byron Carl	512/406-2512
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt Due Date
-1	FY24 TPO for new postage equipment for lease for Brownwood-MC0481, Midland-MC 4534, and Wichita Falls-MC 3323 for 5/1/24-8/31/24. One payment is made annually. This is a 36-month lease for 5/1/24-4/30/27.	985-54	1.00	LOT	5763.84000	\$5,763.84 03/11/2024
					Schedule Total	\$5,763.84
urrent TP0 n HHSC fi	O #HHSTX-4-0000326979 (SmartBuy #2105 scal year.	66190) covers the	rough 4/30/24	. Payments are ma	de annually so invoices mus	t be sent annually based
				Item	Total for Line 1	\$5,763.84
				T	otal PO Amount	\$5,763.84

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	
	Byron	Wright, CTCD,	
	,		03/11/2024
l			