

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms FOB Dest. Prepaid & Add	Ship Via BEST WAY	Purchase Order HHSTX-4-0000340926
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 03/15/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
			Ship To: 0011 - Abilene:4601 S 1st St HEALTH & HUMAN SERVICES COMMISSION 4601 S 1st St PO Box 521 Abilene TX 79605 United States

Vendor: 1363684738 9
ULINE INC
PO BOX 88741
CHICAGO IL 606801741
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.texas.gov

Exempt Reason: N/A

Purchaser: Burns,Debra A

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY24 CLASS ITEM 310-67 962-86
SCOR 13 - HHSC-System Support Services
SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: X 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:

***PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO ***

PO NUMBER MUST BE SHOWN AS "0000340926" ON ALL COMMUNICATION AND DOCUMENTS: CONFIRMATION, PACKING SLIP AND INVOICE

Dock is available with delivery hours of 8:30 am-11:30 am and 1:30 pm-4:30 pm Monday-Friday
SHIP TO ATTN COBY PERRY 325-795-5613 Coby.Perry@hhs.texas.gov
REQUESTER MARY GARCIA 325-795-5516 FAX 325-795-5612 mary.garcia3@hhs.texas.gov
FINANCIAL MANAGER BETTY BROWN 325-795-5512 FAX 325-795-5612 betty.brown@hhs.texas.gov

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

PLEASE SEND INVOICES TO REG02_ADMIN_SERVICES@HHS.TEXAS.GOV

HHSC BUYER:
Debra Burns, CTPM
Direct: 512) 406-2564 CELL 832-818-3936
Debra.Burns@hhs.texas.gov

VENDOR :
VID 1363684738
VENDOR Uline Inc
CONTACT CUSTOMER SERVICE
Phone1-800-295-5510,
Email: customer.service@uline.com
TERMS NET 30

QUOTE 13724681

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INVOICE***

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 0000258681

1-1	Envelopes Self-Seal Tyvek 10 X 13 White 100/CASE Item S-5153	310-67	40.00	CTN	39.50000	\$1,580.00	03/29/2024
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Schedule Total \$1,580.00

Item Total for Line 1 \$1,580.00

2-1	Shipping-Freight per Quote	962-86	1.00	LOT	95.04000	\$95.04	03/29/2024
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Schedule Total \$95.04

Item Total for Line 2 \$95.04

Total PO Amount \$1,675.04

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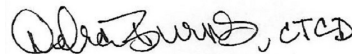
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No substitutions or cancellations are permitted without prior approval by Health & Human Services Commission. If contractor fails to deliver by promised delivery date (or reasonable time thereafter) or fails to meet requirements, Health & Human Services 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



03/15/2024