Department of State Health Services

Purchase Order

Dispatch via Print

Payment Ter	rms Freight Terms	Ship Via		11110=1/1 / 00000 / 0000
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-4-0000340990
specifications	by informal bid, Invitation for Offer, or F s, terms, and conditions set forth in the ad	lvertisement and vendor's	Date 03/15/24	Revision Page
guarantees go requirements All shipment	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.			6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
Vendor:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 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: Email:	512/458-7442 invoices@dshs.texas.gov

Quantity

Purchaser:

UOM

Olvera, Marissa Ann

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

Exempt Reason: WORKQUEST GOODS OR SERVICES

Inventory Item ID - Line Description

DELIVERY: 20 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

Class/Item

AGENCY CONTACT:

Tonya Fairley

Line-Sch

email: Tonya.Fairley@dshs.texas.gov

phone # (512) 776-6027

HHSC Purchaser Marissa Olvera, CTCD 512-776-3099 marissa.olvera1@hhs.texas.gov

VENDOR:

Contractor: Workquest, Inc.

Email: customerservice@workquest.com

Phone: (512) 451-8145

PURCHASING METHOD: EX/0

Purchase made under the Authority of Texas Government Code 2155.138 (WorkQuest/TIBH Set-Aside)

Term Contact: 645-S1

Term: Start Date 02/01/2002 - End Date 11/30/2026

Smartbuy PO:24112245

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 0000257855

1-1 2.00 CTN 81.81000 \$163.62 04/04/2024

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Exempt Rea	ason: WORKQUEST GOODS OR SERVIC	ES		D 1	Ohara Maria			
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	Purchaser: UOM	Olvera, Marissa PO Price	Extended Amt	Due Date	
	Paper, Bond, Recycled, White, Prem No. 4, 20 lb, Letter, Qty Price Breaks		•					
				Sche	edule Total	\$163.62		
				Item Total	for Line 1	\$163.62		
				Total P	O Amount	\$163.62		

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 Marina Denera CTCD 03/15/2024