

# Department of State Health Services

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-5-0000341050</b>
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.			<b>Date</b> 09/01/24
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 1904 - San Antonio:2303 SE Militar DEPARTMENT OF STATE HEALTH SERVICES 2303 SE Military Dr San Antonio TX 78223 United States
			<b>Page</b> 1

**Vendor:** 1742484527 3  
RICHARD VEGLIA DPM PC  
1512 PLEASANTON RD  
SAN ANTONIO TX 782211146  
United States

**Bill To:** Texas Center for Infectious Di  
DEPARTMENT OF STATE HEALTH SERVICES  
2303 SE Military Dr  
San Antonio TX 78223  
United States

**Exempt Reason:** CLIENT PURCHASES

**Purchaser:** Sprague, Jacob

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY25 funding  
EX/0 - Legal Cite 2155.144 Client Purchase  
Requisition 260813 - Pricing per attached Quote  
PO must not exceed \$10,000  
PO Service Dates 09-01-2024 to 08-31-2025  
Goods and/or services are to be delivered and invoiced after September 1, 2024

Services to be performed: Podiatry Services

Attached Terms and Conditions apply to this Purchase Order.

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 08/31/2025 are automatically canceled.

Vendor contact  
RICHARD VEGLIA DPM PC  
Phone number: 210-924-7553 and 210-924 0510  
Email address: rvegliafootcare@yahoo.com

Agency contact  
First and Last Name: Laura, Longoria  
Phone number: 210-393-4039  
Email address: laura.longoria@dshs.texas.gov  
Invoices to GRTCIDFiscalServices@dshs.texas.gov

PCS contact  
First and Last Name: Jacob Sprague  
Phone number: 512-776-2320  
Email address: Jacob.Sprague3@hhs.texas.gov

1-1	Podiatrist services	948-74	1.00	LOT	9900.00000	\$9,900.00	09/01/2024
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**Schedule Total**                     \$9,900.00

**Item Total for Line 1**                     \$9,900.00

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**Total PO Amount** \$9,900.00

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.

<b>Authorized By</b>  Jacob Sprague, CTCD	<b>03/18/2024</b>
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