### **Department of State Health Services**

#### **Purchase Order**

**Dispatch via Print** 

Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-5-0000341463	
specification	by informal bid, Invitation for Offer, or l s, terms, and conditions set forth in the ac	dvertisement and vendor's	<b>Date</b> 09/01/24	Revision Page 1	
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:	5750 - Amarillo:3407 Pony Express DEPARTMENT OF STATE HEALTH SERVICES 3407 Pony Express Way Amarillo TX 79118 United States	
Vendor:	1461063014 8 LONESTAR SUPERIOR SERVICE LONESTAR SERVICES 3309 S FILLMORE ST AMARILLO TX 791101062 United States	S LLC	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	
Exempt Rea	son: N/A		Purchaser:	Hill,Michelle L	

Quantity

FY25 funding SP/E Requisition 0000261725 Pricing per price listing PO Service Dates 09/01/2024 to 08/31/2025 Good and/or services are to be delivered and invoiced after September 1, 2024

Class/Item

Attached Terms and Conditions apply to this Purchase Order.

**Inventory Item ID - Line Description** 

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.

**UOM** 

PO Price

**Extended Amt** 

**Due Date** 

Vendor Contact 1461063014 Lonestar Services Lisa McDonald Icmcdonald@Issama.com 806-576-2496 www.LSSAMA.com

Line-Sch

Agency contact Lori Dye Lori.dye@dshs.texas.gov

Rick Tull -DSHS (Amarillo) Rick.tull@dshs.texas.gov 806-477-1102

Ship to: 3407 Pony Express Way Amarillo, TX 79118

Deliver to South entrance (Overhead door)

PCS contact Michelle Hill 512-776-2851

Michelle.Hill2@hhs.texas.gov

1-1 910-36 1.00 EA 530.00000 \$530.00 09/01/2024

# **Department of State Health Services**

### **Purchase Order**

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Payment Ter	8	Ship Via		LUIOT	V F 0000044400
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSI	X-5-0000341463
specifications	by informal bid, Invitation for Offer, or Res, terms, and conditions set forth in the adv	ertisement and vendor's	<b>Date</b> 09/01/24	Revision	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:	5750 - Amarillo:3407 Pony Express DEPARTMENT OF STATE HEALTH SERVICES 3407 Pony Express Way Amarillo TX 79118 United States	
Vendor:	1461063014 8 LONESTAR SUPERIOR SERVICES LONESTAR SERVICES 3309 S FILLMORE ST	LLC	Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE 1100 W 49th St (RBB) PO Box 149347	

AMARILLO TX 791101062 United States

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

Austin TX 78756

United States

Exempt Reason: N/A

Exempt Re	ason, IVA				chaser: Hill, Michelle L		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
	Fall 2024 Major Maintenance (Preventative)						
					Schedule Total	\$530.00	
					Item Total for Line 1	\$530.00	
2-1	Winter 2024 Minor Maintenace (Preventative)	910-36	1.00	EA	303.00000	\$303.00	09/01/2024
					Schedule Total	\$303.00	
					Item Total for Line 2	\$303.00	
3-1	Spring 2025 Major Maintenance (Preventative)	910-36	1.00	EA	530.00000	\$530.00	09/01/2024
					Schedule Total	\$530.00	
					Item Total for Line 3	\$530.00	
4-1	Summer 2025 Minor Maintenance (Preventative)	910-36	1.00	EA	303.00000	\$303.00	09/01/2024
					Schedule Total	\$303.00	
					Item Total for Line 4	\$303.00	
					Total PO Amount	\$1,666.00	

## **Department of State Health Services**

#### **Purchase Order**

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Payment Te Net 30	erms Freight Terms Prepaid & Allow	Ship V BEST		Purchase Order	HHSTX-5-0000341463
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.				<b>Date</b> 09/01/24	Revision Page 3
				Ship To:	5750 - Amarillo:3407 Pony Express DEPARTMENT OF STATE HEALTH SERVICES 3407 Pony Express Way Amarillo TX 79118 United States
Vendor:	1461063014 8 LONESTAR SUPERIOR SERVICES I LONESTAR SERVICES 3309 S FILLMORE ST AMARILLO TX 791101062 United States	LLC		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
Exempt Rea	ason: N/A			Purchaser:	Hill,Michelle L
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

MLH, CTCD, CTCM

03/21/2024