

# 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-4-0000341738</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> 03/25/24
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 1905 - Arlington:1301 S Bowen Rd HEALTH & HUMAN SERVICES COMMISSION 1301 S Bowen Rd Ste 200 Arlington TX 76013 United States
			<b>Page</b> 1

**Vendor:** 1900999880 8  
SOUTH CENTRAL SUPPLY LLC  
828 BETTERMAN DR  
PFLUGERVILLE TX 786605117  
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:** 512/458-7442  
**Email:** invoices@dshs.texas.gov

**Exempt Reason:** N/A

**Purchaser:** Connell,Ron Lee

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: 7 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 REQUESTER:  
Name: Ellen Ellis  
Phone: (817) 264-4686  
Email address: ellen.ellis@dshs.texas.gov

SHIP TO ATTN: Ellen Ellis, (817) 264-4686, ellen.ellis@dshs.texas.gov

HHSC BUYER:  
Ron Connell, CTCD  
Ron.Connell@hhs.texas.gov  
512-406-2666

Vendor Name: SOUTH CENTRAL SUPPLY LLC  
Contact: Joe Martinez  
Phone #: 512-367-0311  
Email: sales@supplytexas.com  
Quote #Q22147

PURCHASING METHOD: SP/E  
Not to Exceed \$10,000.00

Delivery Days ARO  
Terms Net 30  
Shipping/Freight Terms FOB Destination Prepaid Add

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 #0000259426  
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1-1	Solo New York Rolling Catalog Case, Fits Devices Up to 16", Combo Lock, Polyester, 18 x 8 x 14, Black, Model # PV784	530-45	11.00	EA	119.99000	\$1,319.89	04/01/2024
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**Schedule Total**                      \$1,319.89

**Item Total for Line 1**                      \$1,319.89

**Total PO Amount** \$1,319.89

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**



**03/25/2024**