Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Ter Net 30	ms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-	4-0000342101	
specifications	by informal bid, Invitation for Offer, or I, terms, and conditions set forth in the ac	lvertisement and vendor's	Date 03/28/24	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:	1288 - Arlington:2220 Forum Dr HEALTH & HUMAN SERVICES COMMISSION 2220 Forum Dr Arlington TX 76010 United States		
Vendor:	1391837105 8 4IMPRINT INC 25303 NETWORK PL CHICAGO IL 606731253 United States		Bill To:	Bill To: Invoice-HHSC Financial Service HEALTH & HUMAN SERVICES COM 801 S State Highway 161 PO Box 532089 Grand Prairie TX 75051 United States		
			Fax: Email:	972/337-6257 Reg03_AP@hhsc.state.tx.us		

Exempt Reason: N/A

Purchaser: Connell, Ron Lee Line-Sch **UOM Inventory Item ID - Line Description** Class/Item Quantity 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

DELIVERY: 1 week 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: Andre Rubin 972-337-6398

Andre.Rubin@hhs.texas.gov

Ship To: Andre Rubin, Andre.Rubin@hhs.texas.gov, 972-337-6398

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

Vendor Name: 4Imprint Inc - 1391837105

Contact: Chris Tease

Phone #: 877-446-7746 ext. 8471 Email: ctease@4imprint.com

Quotation: 26746988

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 #0000258189

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				Fax: Email:	972/337-6257 Reg03_AP@hhsc.state.tx.us			
Exempt Reason: N/A				Purchaser:	ser: Connell,Ron Lee			
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
1-1	#115181-6 SERGED VALUE CLOSED BACK TABLE THROW - 6' COLOR: ROYAL BLUE"	165-89	3.00	EA	119.00000	\$357.00	04/04/2024	
				Sch	edule Total	\$357.00		
				Item Tota	l for Line 1	\$357.00		
2-1	#103789 WOLVERINE PEN	620-80	300.00	EA	.72000	\$216.00	04/04/2024	
				Sch	edule Total	\$216.00		
				Item Tota	l for Line 2	\$216.00		
3-1	FREIGHT	962-86	1.00	LOT	22.96000	\$22.96	04/04/2024	

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.

Schedule Total \$22.96

\$22.96

\$595.96

Item Total for Line 3

Total PO Amount

Performance under this purchase order is acceptance of the attached affirmations and terms and conditions.

Authorized By

Reef.

03/28/2024