

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-4-0000342370
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.			Date 04/04/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
			Ship To: 5716 - San Antonio:7430 Louis Past DEPARTMENT OF STATE HEALTH SERVICES 7430 Louis Pasteur Dr San Antonio TX 78229 United States

Vendor: 1943419039 3
4IMPRINT CORPORATE PROGRAMS LLC
101 COMMERCE ST
OSHKOSH WI 549014864
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: Olvera,Marissa Ann

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	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: 14 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 CONTACT:
Linda Garcez
Linda.Garcez@dshs.texas.gov
210/949-2164

Send invoices to: invoices@dshs.texas.gov

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

VENDOR:
VID 1943419039
VENDOR 4IMPRINT CORPORATE PROGRAMS LLC
CONTACT: Liz McGlenn
PHONE: 877-446-7746 Ext. 8434
EMAIL: lmcglenn@4imprint.com

Quote #: 26995653

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

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 # 0000258280

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-4-0000342370
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.			Date 04/04/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 2
			Ship To: 5716 - San Antonio:7430 Louis Past DEPARTMENT OF STATE HEALTH SERVICES 7430 Louis Pasteur Dr San Antonio TX 78229 United States

Vendor: 1943419039 3
4IMPRINT CORPORATE PROGRAMS LLC
101 COMMERCE ST
OSHKOSH WI 549014864
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: Olvera, Marissa Ann

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
	Full Color Adhesive Notepad; Product Color (Base, Trim): Full Color, Full Color Imprint Location: Cover - From each edge Imprint Colors: Full Color					Schedule Total	\$423.00
						Item Total for Line 1	\$423.00
2-1	Set-Up Charge(Per Order Line) for Full Color Adhesive Notepad	037-52	1.00	EA	55.00000	\$55.00	04/18/2024
						Schedule Total	\$55.00
						Item Total for Line 2	\$55.00
3-1	Freight for Full color adhesive notepad	962-86	1.00	EA	21.55000	\$21.55	04/18/2024
						Schedule Total	\$21.55
						Item Total for Line 3	\$21.55
4-1	Etched Pocket Drawstring Sportpack; Product Color (Base, Trim): Navy, Charcoal Imprint Location: Front Imprint Colors: White	037-52	300.00	EA	2.21000	\$663.00	04/18/2024
						Schedule Total	\$663.00
						Item Total for Line 4	\$663.00
5-1	Set-Up Charge for Etched Pocket Drawstring Sportpack	037-52	1.00	EA	35.00000	\$35.00	04/18/2024
						Schedule Total	\$35.00
						Item Total for Line 5	\$35.00

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-4-0000342370
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.			Date 04/04/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 3
			Ship To: 5716 - San Antonio:7430 Louis Past DEPARTMENT OF STATE HEALTH SERVICES 7430 Louis Pasteur Dr San Antonio TX 78229 United States

Vendor: 1943419039 3
4IMPRINT CORPORATE PROGRAMS LLC
101 COMMERCE ST
OSHKOSH WI 549014864
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: Olvera, Marissa Ann

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
6-1	Freight for Etched Pocket Drawstring Sportpack	962-86	1.00	EA	44.86000	\$44.86	04/18/2024

Schedule Total \$44.86

Item Total for Line 6 \$44.86

Total PO Amount \$1,242.41

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 <i>Marissa Olvera</i> CTCD	04/04/2024
--	-------------------