Health and Human Services Commission

Purchase Order

TX SmartBuy PO ID

Dispatch via Print

Payment Term	s Freight Terms	Ship Via			
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSI	(-4-0000342635
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.			Date 04/04/24	Revision	Page 1
			Ship To: 6484 - Mexia:424 Mesquite Dr HEALTH & HUMAN SERVICES COM 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States		
Vendor:	1362596612 5 MEDLINE INDUSTRIES INC		Bill To:	Invoice - DADS HEALTH & HUMAN SERV	ICES COMMISSION

1 MEDLINE PL

MUNDELEIN IL 600604485

United States

540 Chapel Drive PO Box 1132 Mexia TX 76667 United States

Fax: 254/562-1894

Email: 718Accounting@hhs.texas.gov

Exempt Reason: GPO

| Line-Sch | Inventory Item ID - Line Description | Class/Item | Quantity | UOM | PO Price | Extended Amt | Due Date

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

Warehouse Supervisor: Ricky Salazar

P: (254) 562-1372 F: (254) 562-1344

E: ricky.salazar@hhs.texas.gov Reg Manager: Taylor Gain

ACCOUNT PAYABLE:

E: 718accounting@hhs.texas.gov

HHSC BUYER: Desiree Alvarez, CTCD P: (512) 776-2033

E: Desiree.Alvarez@hhs.texas.gov

VENDOR: Holly Carner P: (202)100-3157 E: hcarner@medline.com

MMCAP GPO and HHS Contract # HHS000626500001 MMCAP GPO and Medline Contract 2021003157

PURCHASING METHOD: EX/0

Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

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: MIM2414412 / Line: 36.

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Exempt Re	eason: GPO		Purchaser:	Alvarez,Desiree C	
Line-Sch	Inventory Item ID - Line Description	Class/Item Ouantity	UOM	PO Price Extended Amt Due Date	

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Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
1-1	640-60-29052-1 LID CUP PRNT 4OZ 2500/CS MEDLINE NONPL4N	640-60	21.00	CS	52.24000	\$1,097.04	04/18/2024
					Schedule Total	\$1,097.04	
					Item Total for Line 1	\$1,097.04	
					Total PO Amount	\$1,097.04	

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	
plesine Chranez CTCD	04/04/2024