Department of State Health Services

Purchase Order

Dispatch via Print

Payment Ter	8	Ship V		Dural and Only			003/3605
Net 30Prepaid & AllowBEST WAYIf 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.				Purchase Order Date 04/15/24	HHSTX-4-0000343609 Revision Pag 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States		
				Ship To:			
Vendor:	1231887442 2 PROJECT MANAGEMENT INSTITU PO BOX 789007 PHILADELPHIA PA 191789007 United States	TE INC		Bill To:	Invoice-DSHS Fis DEPARTMENT (1100 W 49th St (F PO Box 149347 Austin TX 78756 United States	OF STATE HEALTH RBB)	I SERVICES
				Fax: Email:	512/458-7442 invoices@dshs.tex	xas.gov	
Exempt Rea	son: N/A			Purchaser:	Bovea,Taylor		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date

FY24 funding

SP/E - not to exceed \$10,000.00

Requisitions 0000261346, 0000261326, 0000261397 - Pricing per Orders # 30004122454, 30004124263, 30004140505

Attached Terms and Conditions apply to this Purchase Order.

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.

Vendor contact: Customer support customercare@pmi.org 610-915-2273

Agency contact: Michele Torres 512-695-9575 michele.torres@dshs.texas.gov

PCS contact: Taylor Bovea, CTCD, CTCM Taylor.bovea@hhs.texas.gov 512-776-2210

1-1	Project Management Institute (PMI) Annual Membership for Lillian Meza	963-48	1.00	EA	159.00000	\$159.00	04/15/2024
					Schedule Total	\$159.00	
					Item Total for Line 1	\$159.00	
2-1	Project Management Institute (PMI) Annual Membership for Marlie Harris	963-48	1.00	EA	159.00000	\$159.00	04/15/2024
					Schedule Total	\$159.00	

Department of State Health Services

Purchase Order

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Payment Ten Net 30	rms Freight Terms Prepaid & Allow	Ship V BEST		Purchase O	rder	HHSTX-4-000034360		
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				Date 04/15/24	Revision	Pag		
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:	HEALTH & HU 1111 W North L	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States		
Vendor:	lor: 1231887442 2 PROJECT MANAGEMENT INSTITUTE INC PO BOX 789007 PHILADELPHIA PA 191789007 United States		Bill To:	DEPARTMENT 1100 W 49th St (PO Box 149347	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756			
				Fax: Email:	512/458-7442 invoices@dshs.te	exas.gov		
Exempt Rea	son: N/A			Purchaser:	Bovea,Taylor			
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt Due Date		
				Item 7	Fotal for Line 2	\$159.00		
3-1	Project Management Institute (PMI) Annual Membership for Anthony V. Patterson	963-48	1.00	EA	159.00000	\$159.00 04/15/2024		
					Schedule Total \$159.00			
				Item 7	Fotal for Line 3	\$159.00		
				Та	otal PO Amount	\$477.00		

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 Type Buvea, CTCD, CTCM	
Jayon Coura, Oroc, Oroc	04/15/2024