

Report ID:EBPO0055  
 Database: FSPRD  
 Prepared By: Rivers,Michele D  
 Run Date: 7/30/2020 13:11 PM  
 Prompts: SetID:HHSTX  
 Bill/Ship SetID: HHSTX

**HHS Purchasing**  
**Contract Purchase Order**



Contract ID: HHS000871300001  
 Bill To: 1788

Supplier Loc: 000  
 Ship To: 1823

Contract Begin Date: <b>09/01/2020</b>	Contract End Date: <b>08/31/2022</b>	Contract PO Number: <b>HHS000871300001</b>	Status <b>I - A</b>	Entered Data <b>07/24/2020</b>
Maximum Contract PO Amount: HHS Agencies guarantee no minimum or maximum quantity for Contract Purchase Orders		<b>116328.96</b>		
		Contract Manager:		

The State of Texas Agencies, including HHS Agencies, are exempt from all Federal Excise Taxes. The undersigned claims the State and City sales tax exemptions under Texas Tax Code, Section 141.309(4), for tangible goods and services. All subsequent shipments or releases shall be FOB Destination unless otherwise specified in the original solicitation. Additional ship and bill to locations identified in the original solicitation may be specified on a purchase order release referencing this contract.

**1741976051**  
**WORKQUEST**  
**1011 E 53RD 1/2 ST**  
**AUSTIN TX**  
**787511703**

**Primary Bill To: HEALTH & HUMAN SERVICES COMMISSION**  
**5425 Polk St**  
**PO Box 16017**  
**Houston TX**  
**77023**

**Primary Ship To: DEPT FAMILY AND PROTECTIVE SERVICES**  
**3 Northpoint Dr**  
**PO Box 16017**  
**Houston TX**  
**77060**

FY21 funding  
 EX/0 ; Blind-made goods or services offered for sale to state agencies - TGC 2155.138  
 Requisition 120434

NOTE: If PO is attached to a contract, add the following to header comments:  
 Contract HHS000871300001  
 Contract Term: 09/01/2020 to 08/31/2022 ; one (1) two-years Renewals  
 Contract Terms and Conditions apply to this Purchase Order.

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 or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods actually ordered and received by the agency. Any funds not utilized by 08-31-2021 are automatically canceled.

Vendor contact Workquest  
 VID 17419760511  
 First and Last Name JD Fripp  
 Phone number (832)-379-3101  
 Email address jfrripp@workquesttx.com

Facility contact  
 First and Last Name Shekima Fleary  
 Phone number 713-767-2481  
 Email address shekima.fleary@hhsc.state.tx.us  
 Facility (if applicable)

PCS contact  
 First and Last Name Michele Rivers  
 Phone number 512-406-2449  
 Email address michele.rivers@hhsc.state.tx.us

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Line Item	Line Item Description	Class	Max Ln Quantity	UoM	Unit Price	Max Line Amount
1	FY21 Janitorial Services Day-Porter 3 Northpoint Drive , Houston , TX	910	1	LOT	28512	28512

All specifications, terms, and conditions set forth in the contractor's conforming solicitation response become a part of this Contract Purchase Order. Vendor guarantees goods and services delivered will meet or exceed specifications. No substitutions, over-shipments or cancellations are permitted without prior approval from the agency. If the vendor fails to deliver by promised delivery date or fails to meet advertised specifications, the agency reserves the right to purchase elsewhere and charge any increase in cost and handling to the contractor. The dispute resolution process provided for in Chapter 2260 of the Texas Government Code must be used by the agency and the Vendor to attempt to resolve all disputes arising under this contract.

\_\_\_\_Releases against this Contract Purchase Order are done by issuing a Purchase Order release and require all shipments, invoices, and correspondence to be identified with the Purchase Order #.

\_\_\_\_Releases against this Contract Purchase Order are to be done by HHS Purchaser or Contract Manager authorization and are to be identified by this Contract Purchase Order #.

**HHS Purchaser**

**Signature:** Michele Rivers

**Date:** July 30,2020

**Phone:** 512-406-2449