## **Health and Human Services Commission**

#### **Purchase Order**

						Dispatch via Print
Payment Ter Net 30	ms Freight Terms Prepaid & Allow	Ship V BEST		Purchase Order	F	IHSTX-2-0000268664
specifications,	y informal bid, Invitation for Offer, or Re terms, and conditions set forth in the adv	ertisement and ve	Date 09/01/21	Revision	Page	
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: 5070 - Harlingen:1401 S Rangervill   DEPARTMENT OF STATE HEALTH SE   1401 S Rangerville Rd   PO Box 2668   Harlingen TX 78552   United States		F STATE HEALTH SERVICES Rd
Vendor:	ndor: 1160468020 4 XEROX CORPORATION PO BOX 802555 CHICAGO IL 606802555 United States		Bill To:	Invoice-DSHS Accounts Payable HEALTH & HUMAN SERVICES COMMISSION 6711 S New Braunfels Ste 100 San Antonio TX 78223 United States		
				Fax: Email:	210/531-7883 SAHAccounting@d	lshs.texas.gov
				Purchaser:	Wright,Byron Carl	512/406-2512
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt Due Date

PCC IT/I Class: 985 Item: 26 Requisition #: 162783

Goods and/or services are to be delivered and invoiced after September 1, 2021.

Requisition previous PO: 239145

Purchase Order Term Coverage: 09-01-21 to 08-31-22

This PO is authorized per the State of Texas contract number DIR-SDD-497-HHSC 009-108-00001, the terms and conditions of Xerox's Document Managed Services Agreement #7180103-001 / Group # 7130654-035

IT/I

Sub Contact issued off of HHS000910800001 to track facility/regional expenditures

(Rio Grande) (FY22) This PO is for (12) months of a (60) month lease agreement for Xerox Multifunction copiers and Overages/Moves. All bw overages above 3406307 monthly bw allowances will be \$0.005 and all color overages above 28237 monthly color allowances will be \$0.0506. Both are billed and reconciled semi-annually. Contract includes all consumables, excluding paper.

This contract is contingent upon the continued availability of lawful appropriations by the Texas Legislature.

Purchase order issued in accordance with Texas Government Code 2157.068, (e-1), DIR-CPO-4412. All associated documents are included herein either by attachment or reference

Vendor Information: Vendor: Xerox Corporation Contact Name: Joseph Jimenez Services / VID: 1160468020 Email: joseph.jimenez@xerox.com Phone: 713.620.8477

Service Location:1401 S Rangerville Rd PO Box 2668 Harlingen TX 78552 Agency #: DEPARTMENT OF STATE HEALTH SERVICES

# Health and Human Services Commission

## **Purchase Order**

Dispatch via Print

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Net 30 If advertised b	Prepaid & Allow by informal bid, Invitation for Offer, or Req	BEST WA		Purchase ( Date	Drder Revision	111317-2-0	00020000 Page
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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:	Ship To: 5070 - Harlingen:1401 S Rangervill DEPARTMENT OF STATE HEALTH SERV 1401 S Rangerville Rd PO Box 2668 Harlingen TX 78552		H SERVICES
					United States	e	
Vendor:	1160468020 4 XEROX CORPORATION PO BOX 802555 CHICAGO IL 606802555 <b>United States</b>			Bill To:	Invoice-DSHS Ac HEALTH & HUN 6711 S New Brau Ste 100 San Antonio TX 7 United States	IAN SERVICES Confels	OMMISSION
				Fax: Email:	210/531-7883 SAHAccounting@	210/531-7883 SAHAccounting@dshs.texas.gov	
1 6-h		<u>()/(</u>	0	Purchaser:	Wright,Byron Ca		12/406-2512
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
mariag.rodri 956-364-84	driguez, CTCM, guez2@hhs.texas.gov						
Byron Wrigh Ph. 512-406 EmaiL:Byror							
1-1	FY22 Services, CG2-RGSC, Renew/Refresh Xerox MDO devices	985-26	12.00	MOS	15153.22000	\$181,838.64	09/01/2021
					Schedule Total	\$181,838.64	
Contract_ID:	HHS000910800017	Contract Line:	0	Release:	1		
				Item	Total for Line 1	\$181,838.64	
	All b&w overages above 541577 monthly b&w allowance will be \$0.0051 and all color overages above 13808 monthly color allowance will be \$0.0501. Both are billed and reconciled semi-annually. Contract includes all consumables, excluding paper	985-26	1.00	LOT	2000.00000	\$2,000.00	09/01/2021
					Schedule Total	\$2,000.00	
Contract_ID:	HHS000910800017	Contract Line:	0	Release:	2		
			-		Total for Line 2	\$2,000.00	
3-1	Moves to be billed only if requested outside of provided MACD process	985-26	1.00	LOT	1000.00000	\$1,000.00	09/01/2021

## **Health and Human Services Commission**

#### **Purchase Order**

**Dispatch via Print** Ship Via **Payment Terms** Freight Terms HHSTX-2-0000268664 Net 30 Prepaid & Allow BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Date Revision Page specifications, terms, and conditions set forth in the advertisement and vendor's 09/01/21 3 conforming responses become a part of this numbered purchase order. Contractor 5070 - Harlingen: 1401 S Rangervill Ship To: guarantees goods or services delivered meet or exceed numbered purchase order DEPARTMENT OF STATE HEALTH SERVICES requirements. 1401 S Rangerville Rd All shipments, shipping papers, invoices, and correspondence must be identified PO Box 2668 with our Purchase Order Number. Harlingen TX 78552 United States 11604680204 Bill To: Invoice-DSHS Accounts Pavable Vendor: XEROX CORPORATION HEALTH & HUMAN SERVICES COMMISSION PO BOX 802555 6711 S New Braunfels CHICAGO IL 606802555 Ste 100 San Antonio TX 78223 **United States** United States Fax: 210/531-7883 Email: SAHAccounting@dshs.texas.gov **Purchaser:** Wright,Byron Carl 512/406-2512 PO Price Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity UOM Extended Amt Due Date Schedule Total \$1.000.00 Contract ID: HHS000910800017 Contract Line: 0 Release: 3 Item Total for Line 3 \$1.000.00 Total PO Amount \$184,838.64

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	
Byrra	Wright, ctcp,	
		<u>07/28/2021</u>