Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via		LILICT	V 4 0000047606		
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	ппот	X-4-0000317686		
	ormal bid, Invitation for Offer, or s, and conditions set forth in the a		Date 09/01/23	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.			Ship To:	··- ·			
All shipments, ship with our Purchase	ping papers, invoices, and corr Order Number.	espondence must be identified		Ste 840 Austin TX 78728 United States			

Vendor: 1870983468 5

TEXAS FOUNDATION FOR MATERNAL INFANT A

PMB55

9110 N LOOP 1604 W STE 104 SAN ANTONIO TX 782493397

United States

Bill To: Invoice-HHSC Accounting

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/424-6901

Email: HHSC_AP@hhsc.state.tx.us

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

FY24 Funding

PM/PCC OM/S

HHS000661600002 REQ 231325

Contract Manager Lisa Bell 512-341-4571 lisa.bell1@hhs.texas.gov

PCS contact Carlos Mojica 512-783-4645 carlos mojica@hh

carlos.mojica@hhs.texas.gov

(FOR HHS ACCOUNTS PAYABLE USE ONLY): WIC PROGRAM INVOICE APPROVER: MELISSA ANDERSON AT MELISSA.ANDERSON@HHS.TEXAS.GOV (FOR HHS ACCOUNTS PAYABLE USE ONLY)

1-1 924-16 1.00 LOT 2500.00000 \$2,500.00 09/01/2023

FY24 Amendment No. 3 to change contract number to HS000661600002 and change vendor name. Request to encumber funds in the amount of \$25,000 for Lactation and Breastfeeding

Trainer Services. (Sept)

Schedule Total \$2,500.00

Contract_ID: HHS000661600002 Contract Line: 0 Release: 3

Item Total for Line 1 \$2,500.00

2-1 924-16 1.00 LOT 22500.00000 \$22,500.00 09/01/2023

FY24 Amendment No. 3 to change contract number to HS000661600002 and change vendor name. Request to

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST W		Purchase Orde	er	HHSTX-4-000	0317686
specification	by informal bid, Invitation for Offer, or Rec s, terms, and conditions set forth in the adve	Date 09/01/23	Revision		Page 2		
guarantees go requirements All shipmen	responses become a part of this numbered proods or services delivered meet or exceed notes. tts, shipping papers, invoices, and corresporchase Order Number.	Ship To:	HEALTH & HUI 4616 W Howard Ste 840	Austin TX 78728			
Vendor:	1870983468 5 TEXAS FOUNDATION FOR MATERNAL INFANT A PMB55 9110 N LOOP 1604 W STE 104 SAN ANTONIO TX 782493397 United States						Bill To:
			Fax: Email:	512/424-6901 HHSC_AP@hhso	512/424-6901 HHSC_AP@hhsc.state.tx.us		
				Purchaser:	Mojica,Carlos	512/4	106-2635
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt I	Due Date
	encumber funds in the amount of \$25,000 for Lactation and Breastfeeding Trainer Services. (Oct-Aug)						
				Scl	hedule Total	\$22,500.00	
Contract_ID:	HHS000661600002	Contract Line:	0	Release:	4		
				Item Tota	al for Line 2	\$22,500.00	
				Total	PO Amount	\$25,000.00	

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

Larlos Magia - CTCD, CTCM

05/18/2023