



Texas Department of Motor Vehicles
Business Unit # 60800
Purchase Order # 0000008627

Payment NET30 Freight PREPAY Ship Via: VNDR PCC: C Date: 08/18/20 PO Method: DG Dispatch: Dispatch Rev Dt:
Terms: Terms: AND ADD Via Print

PLEASE NOTE: ADDITIONAL TERMS AND CONDITIONS MAY BE LISTED AT THE END OF THE PURCHASE ORDER.

Vendor: DEPARTMENT OF STATE HEALTH SERVICES
1100 W 49TH ST
AUSTIN TX 787563101
United States

Ship To: 1P00 - TxDMV Warehouse
4000 Jackson Avenue
Austin TX 78731
United States

Vendor ID: 3537537537 1

Purchaser: Amanda Leigh Maxwell
Phone:
Fax:

Bill To: 4000 Jackson Avenue
Austin TX 78731
United States

Bill To Fax:

Email: Amanda.Maxwell@txdmv.gov

Bill To Email: DMV_FIN-INVOICES@TxDMV.gov

PO Information:

966-M2 IAC - Texas Health and Human Services Commission

PO Information:

Change Orders:

Change orders will be allowed only if unforeseen conditions arise such as, but not limited to, increasing or decreasing quantities or if the department needs dictate changes. All changes shall be in the scope of original work. No verbal change orders shall be permitted. All change orders must be in writing with a Purchase Order Change Notice (POCN) issued by TxDMV Purchasing Section.

Payment:

Payment will be made in accordance with the Texas Prompt Payment Act, TGC, Subtitle F, Chapter 2251. Vendor shall submit one copy of a correct itemized invoice showing the purchase order number, payee ID., remit to address, and phone number on invoice. Vendors may submit an electronic invoice. All electronic invoices shall be sent to DMV_FIN-INVOICES@txdmv.gov (note: There is an underscore "_" between DMV and FIN). All invoices received at the email address will be filed for future reference and you will receive a receipt confirmation email. To avoid the confusion of duplicate invoices, please do not send other copies of this invoice via regular mail, fax or other means. On emails for electronic invoices, include the company name (as it appears on the invoice) and the purchase order number in the subject line to assist in identifying and processing your invoices in a timely manner. TxDMV will not incur any penalty for late payment if payment is made in 30 days or less from receipt of goods or services and a correct invoice, which-ever is later.

Interagency Agreement Contract Act:

Texas Government Code, Title 7, Chapter 771

Note: warrants will not be issued to a vendor without a current Texas Identification Number.

HHS Quote# 17356

HHS Printing Services

12300 Technology Blvd
Austin Texas 78727
ATTN: Allyson Touchet or Jennifer Rimes
Jennifer.Rimes@hhsc.state.tx.us
Allyson.Touchet@hhsc.state.tx.us

TxDMV Contact: Sue Russell Hernandez

Office of Administrative Hearing
Email: sue.hernandez@txdmv.gov
Phone: (512) 465-5000

Authorized Signature

[Handwritten signature]

08/18/2020



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Line-Sch:	Line Description:	Class/Item:	Quantity:	UOM:	Unit Price:	Extended Amt:	Due Date:
1-1	Print Services Only - Return address to read: (DMV LOGO) Texas Department of Motor Vehicles Office of Administrative Hearings 4000 Jackson Avenue, Austin, Texas 78731	966/31	4.0000	BOX	\$41.06250	\$164.25	08/28/2020
	DMV supplied - 10x13 White, Peel & Seal Envelope						
						Schedule Total	<input type="text" value="\$164.25"/>
				ReqID:			
				0000009507			
Sue Russell Hernandez Office of Administrative Hearing Email: sue.hernandez@txdmv.gov Phone: (512) 465-5000						Item Total for Line # 1	<input type="text" value="\$164.25"/>

Total PO Amount

All Shipments, Shipping papers, invoices and correspondence must be identified with our Purchase Order Number. Over shipments will not be accepted unless authorized by Purchaser prior to Shipment.

Texas Department of Motor Vehicles Standard Terms and Conditions can be found at: <http://www.txdmv.gov/contractors-vendors>

Authorized Signature

Sue Russell Hernandez, Purchaser

08/18/2020



HHS Printing
MC Y909
12300 Technology Blvd
Austin, TX 78727
Phone (512) 250-7110
Fax (512) 219-1958
<http://www.hhsprinting.com>

Quotation 17356

To: DEPT OF MOTOR VEHICLES
4000 Jackson Ave.
Austin, TX 78731
ATTN: Amanda Maxwell
Phone (512) 465-1226
Email amanda.maxwell@txdmv.gov

Date 8/18/20
Salesperson HHS Printing

Dear Amanda Maxwell,

We would like to thank you for your time and consideration in regards to this quotation. Included is the detailed product specifications and prices. The quotation is confidential and is intended solely for the use of the addressee(s) named above.

Below Is Your Detailed Production Specifications for this Request

Description	Envelopes 10 x 13 White Peel & Seal-Provided	
Prices	Quantity	Price
	2,000	\$164.25
	10 x 13, Black Ink, 1 Sided, White Peel & Seal Envelopes-Provided	
Schedule	Delivery dates are based on proof being returned as expected	

Sincerely,
HHS Printing

IN ORDER TO ENSURE QUOTED PRICE IS HONORED QUOTE # MUST BE REFERENCED ON WORK REQUEST

Upon acceptance please indicate the quantity required. As always, quotes are based on a physical inspection of your originals and are valid for 30 days unless otherwise specified.

Thank You for giving us the opportunity to submit this quote.