



# PURCHASE ORDER

**PO Number:**303-6-0163

**Order Date:** 10/14/2015

*Requisition Number:*303-6-00395

**Released**

MAIL INVOICE TO AGENCY BELOW

TEXAS FACILITIES COMMISSION  
 FISCAL MANAGEMENT / ACCOUNTS PAYABLE  
 P.O. BOX 13047 Austin, Texas 78711-3047  
 OR  
 email to: [accountspayable@tfc.state.tx.us](mailto:accountspayable@tfc.state.tx.us)

**Delivery Location**

Department of Health Old Plant  
 1100 W. 49TH Street  
 Austin, TX 78701

**Show numbers on all papers and packages**

**Referenced Source or Vendor**

17423060890  
 AMERICAN HERMETICS INC OF AUSTIN  
 4905 COMMERCIAL PARK DR  
 AUSTIN, TX 787242638  
 Judson Murphy  
 Phone:512-415-0453, Fax:512-928-2006  
[judson.murphy@gmail.com](mailto:judson.murphy@gmail.com)

**Description** Internal Repair  
 DHOP- Diagnose problems with Vane arm and sensor

**Line Items**

| Description   | Qty | Unit | Unit Price | Start Date | End Date   | Total    |
|---|-----|------|------------|------------|------------|----------|
| Internal Repair   | 1   | Job  | \$285.00   | 10/14/2015 | 12/31/2015 | \$285.00 |
| BUILDING: DHOP  |     |      |            |            |            |          |
| LOCATION: Mechanical room                               |     |      |            |            |            |          |
| HISTORY: Chiller 1 not cooling properly                 |     |      |            |            |            |          |
| DESCRIPTION: Diagnose problems with Vane arm and sensor |     |      |            |            |            |          |

JUSTIFICATION: This chiller is used for cooling

FUNDING: (HB3042)

OVERSIGHT RESPONSIBILITIES: Dan Simms 512-463-3532

"Services performed under this agreement are not considered complete for purposes of payment until TFC, or its authorized designee, inspects and accepts the work performed by the vendor."

**NIGP Class:** 910

**NIGP Item:** 36

**Object Class:** 266

**Reimbursement Type:** HB3042

**Grand Total \$285.00**

Questions or concerns regarding this transaction or service should be directed to: Texas Facilities Commission Procurement Division, Phone: (512)463-0209 or FAX: (512)236-6164 (The mailing address for the Texas Facilities Commission is at the top of this purchase order.)

|                                  |                                      |
|----------------------------------|--------------------------------------|
| <b>Agency</b>                    | TFC                                  |
| <b>Fiscal Year</b>               | 2016                                 |
| <b>Division</b>                  | Planning and Real Estate Mgmt        |
| <b>Program</b>                   | Property Management                  |
| <b>Phone</b>                     | 5124633532                           |
| <b>Org Code</b>                  | 0442 - Facility Maintenance          |
| <b>Type of Purchase/PCC Code</b> | Services Purchase \$5000 or less - E |
| <b>Work Order Number</b>         | 511495                               |

ALL TERMS AND CONDITIONS SET FORTH IN OUR BID INVITATION BECOME A PART OF THIS ORDER.  
VENDOR GUARANTEES MERCHANDISE WILL MEET OR EXCEED SPECIFICATIONS IN THE BID INVITATION.

#### **Invoicing Standards**

To facilitate payments from Texas Facilities Commission please follow the invoicing standards set forth below.

The invoice should include, but is not limited to including:

- (1) the vendor's mailing and e-mail (if applicable ) address;
- (2) the vendor's telephone number;
- (3) the name and telephone number of a person designated by the vendor to answer questions regarding the invoice;
- (4) the state agency requisition number;
- (5) the state agency's name, agency number, and delivery address;
- (6) the commission's purchase order number, if applicable;

- (7) the contract number or other reference number if applicable;
- (8) a valid Texas Identification Number (TIN) issued by the Comptroller of Public Accounts;
- (9) a description of the goods or services, in sufficient detail to identify the order which relates to the invoice;
- (10) unit numbers corresponding to the original order; and
- (11) other relevant information supporting and explaining the payment requested or identifying a successor organization to an original vendor, if necessary.

**FOB DESTINATION CASH DISCOUNT: 0% 0 DAYS.**

**TEXAS FACILITIES COMMISSION INTERNAL PURCHASING**

PURCHASER: \_\_\_\_\_  
Ehlert, Richard - CTPM, 5124630209

**(IN ACCORDANCE WITH YOUR BID, SUPPLIES MUST BE PLACED IN THE AGENCY RECEIVING ROOM IN DAYS FROM RECEIPT OF ORDER.)**

STATE AND CITY SALES TAX EXEMPTION CERTIFICATE: The undersigned claims an exemption from taxes under Chapter 20, Title 122A, Revised Civil Statutes of Texas, for purchase of tangible personal property described in this number order, purchased from contractor and/or shipper listed above, as this property is being secured for the exclusive use of the State of Texas

(Show Terms And Conditions...)

