



PURCHASE ORDER

PO Number:303-0-0440

Requisition Number:303-0-01040

Order Date: 12/30/2019

Ordered

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

Delivery Location

Parking Garage R, Warehouse
1706 San Jacinto Blvd.
Austin, TX 78701

Show numbers on all papers and packages

Referenced Source or Vendor

1741976051100
WorkQuest
1011 EAST 53 1/2 STREET
Austin, TX 78751
Abby Monk
Phone:512-451-8145, Fax:
amonk@tibh.org

Description

Lotion Hand Soap
TFC Contact: Pete Garcia
512-463-3566
pete.garcia@tfc.state.tx.us

Line Items

Description	Qty	Unit	Unit Price	Start Date	End Date	Total
GOJO/ SKILCRAFT Green Certified FMX foam hand soap REFILL, 1250ml, For use in GOJO FMX-12 dispenser						
NIGP Class: 485						
NIGP Item: 86	20	CASE	\$46.59	12/30/2019	2/28/2020	\$931.80
Object Class: 300						
Reimbursement Type: HB3042						
Notes: Commodity Code: 48586551706 Term Contract 485-A1						

Grand Total \$931.80

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.)

Agency	TFC
Fiscal Year	2020
Division	Planning and Real Estate Mgmt
Program	Property Services
Phone	5124633566
Org Code	0451 - Custodial - Austin Day
Type of Purchase/PCC Code	'A' Purchases as Automated Term Contracts using TxSmartBuy
Work Order Number	714384-DBGL

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: _____
Sacharnoski, Mary - CTPM, 5129360647

(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 Tex. Tax Code § 151.309 (1993), for purchase of tangible property described in this purchase order, purchased from contractor and/or shipper listed above, as this property is being secured for the exclusive use of the State of Texas.

[\(Show Terms And Conditions...\)](#)