



PURCHASE ORDER

PO Number:303-8-0084

Requisition Number:303-8-00204

Order Date: 9/26/2017

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

Delivery Location

Texas School for the Blind and Visually Impaired
 1100 W. 45th Street
 Austin, TX 78756

Show numbers on all papers and packages

Referenced Source or Vendor

17422755193
 Texas Association of School Boards (TASB)
 12007 Research Blvd., Suite 100
 Austin, TX 78759-2472
 Tiffany Hammond
 Phone:512-934-7438, Fax:512-483-7179
tiffany.hammond@tasb.org

Description TSBVI- Justification TASB

Line Items

| Description | Qty | Unit | Unit Price | Start Date | End Date | Total |
|-----------------|-----|------|------------|------------|-----------|----------|
| BUILDING: TSBVI | 1 | yr | \$950.00 | 9/1/2017 | 8/31/2018 | \$950.00 |

HISTORY: The TASB facilities Services helps manage regulatory compliance with EPA laws and provides necessary to staff for school districts.

DESCRIPTION: Renew the membership with TASB Facility Services for TSBVI

JUSTIFICATION: The TASB Facility Service Team will help keep TSD in compliance with federal laws regarding asbestos and integrated pest management on the school campuses.

FUNDING: 0442

Contract term 9/1/2017 - 8/31/2018

OVERSIGHT RESPONSIBILITIES: Shane Howell,
512-206-9128

NIGP Class: 963

NIGP Item: 48

Object Class: 299

Reimbursement Type: Not Reimbursable

Grand Total \$950.00

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.)

| | |
|----------------------------------|--------------------------------------|
| Agency | TFC |
| Fiscal Year | 2018 |
| Division | Planning and Real Estate Mgmt |
| Program | Property Management |
| Phone | 5124638710 |
| Org Code | 0442 - Facility Maintenance |
| Type of Purchase/PCC Code | Services Purchase \$5000 or less - E |
| Work Order Number | na |

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: _____

Page: 1
 Date: 9/1/2017
 Cost Center 159
 P.O. Number
 Customer 1227905
 Invoice 529562

INVOICE

David Howell
 TX SCH FOR THE BLIND & VISUALLY IMPAIRED
 1100 WEST 45TH STREET
 AUSTIN TX 78756-3494

Notes: Terms Due Date Net 30 Days 10/1/2017

| Qty | Units | Description | Unit Price | Total |
|------|-------|---|------------|--------|
| 1.00 | EA | Facility Services Annual Membership (0-250 ADA) | 950.00 | 950.00 |

September 1, 2017 - August 31, 2018

THE TERMS AND CONDITIONS ON THE REVERSE SIDE GOVERN YOUR TASB FACILITY SERVICES MEMBERSHIP. PAYMENT OF YOUR ANNUAL MEMBERSHIP FEE AND/OR USE OF ANY SERVICES AS A FACILITY SERVICES MEMBER CONTITUTE YOUR ACCEPTANCE OF THESE TERMS AND CONDITIONS.

| | |
|-------------|----------|
| Subtotal | \$950.00 |
| Tax | |
| Balance Due | \$950.00 |

Please detach this stub and return it with your payment.

| | | | | | |
|--|---------|-----------------------|----------------|-------------|----------|
| REMITTANCE | | TASB, Inc. | | Customer | 1227905 |
| | | PO Box 975112 | | Invoice | 529562 |
| | | Dallas, TX 75397-5112 | | Balance Due | \$950.00 |
| Payment Amount | | | Check Enclosed | YES | NO |
| To pay by credit card (VISA/MC/AMEX), please complete all of the following information: | | | | | |
| Card Number | | | Exp Date | CVV# | |
| Cardholder Name | | | Billing Street | | |
| Billing Zip | Phone # | | | | |
| Signature | | | Date | | |
| Email Address for credit card receipt | | | | | |
| Credit card payments can be received at our secure fax number (512) 467-3515. | | | | | |

