



## PURCHASE ORDER

**PO Number:***Requisition Number:***Order Date:** 11/8/2017**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](mailto:accountspayable@tfc.state.tx.us)

Delivery Location

--Select--

**Show numbers on all papers and packages**

Referenced Source or Vendor

13409484535  
 Society for Human Resource Management  
 PO BOX 79482  
 Baltimore, MD 21279-6490  
 Member Care  
 Phone:800-283-7476 option 3, Fax:703-535-6490  
 SHRM@SHRM.org

<b>Description</b>	Membership Dues for Society for Human Resource Management  TFC Contact: Catherine Camp, 512-463-9996

## Line Items

Description	Qty	Unit	Unit Price	Start Date	End Date	Total
Annual Membership Dues for Richard Allen to Join SHRM  <b>NIGP Class:</b> 963 <b>NIGP Item:</b> 48 <b>Object Class:</b> 201 <b>Reimbursement Type:</b> Not Reimbursable <b>Notes:</b> Dates are estimates only. Membership will begin when form and payment received.	1	Year	\$179.00	11/15/2017	11/15/2018	\$179.00
<b>Grand Total</b>						<b>\$179.00</b>

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>	2018
<b>Division</b>	Executive
<b>Program</b>	Human Resources
<b>Phone</b>	5124639996
<b>Org Code</b>	0602 - Human Resources Office
<b>Type of Purchase/PCC Code</b>	Services Purchase \$5000 or less - E
<b>Work Order Number</b>	n/a

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: \_\_\_\_\_

Gamino Jr, Rico - CTPM, CTCM, 5129363567

**(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 Chapter20, 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

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