



Procurement and Contracts
Business Unit # 320AD
Purchase Order # 24-0003305

Payment Terms: N/A **Freight Terms:** N/A **Ship Via:** N/A **PCC:** D **PO Date:** 06/03/2024 **PO End Date:** **PO Method:** IT **Dispatch:** Dispatch Via Print **Rev Dt:**

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

Vendor: MCG HEALTH LLC
DBA ODG BY MCG
PO BOX 742350
ATLANTA GA 30374-2350
United States

Ship To: Texas Workforce Commission
4405 SPRINGDALE RD
RM 144T
AUSTIN TX 78723
United States

Bill To: APPO@twc.texas.gov or
Texas Workforce Commission
101 E 15TH ST
RM 470
AUSTIN TX 78778-0001
United States

Vendor ID: 1331104821 002

Purchaser: Delight K Dehorty
Phone: (737) 249-0658

Fax:
Email: delight.dehorty@twc.texas.gov

TWC Prefers Electronic Submission

PO Information:

Per MCG Health LLC corresponding Invoice No. QT-000703 dated 04/08/2024.
By acceptance of this purchase order, Vendor agrees that only TWC Standard Terms Conditions Revised 01/30/2024 (ATTACHMENT I) apply to this order.

This purchase is according to Delegated AIS not on DIR contract per 34 Texas Administrative Code § 20.391.

Contract #0000009621
TWC Contract #3124ITC052

Contract Manager:
Name: Megan McMurtray
Tel:
E-mail: megan.mcmurtray@twc.texas.gov

Vendor Contact:
Name: Suzanne Swirsky
Tel:
E-mail: suzanne.swirsky@mcg.com

Submit invoices via email to APPO@twc.texas.gov and the Contract Manager listed above. PDF or Word Documents only are accepted. All Invoices must include reference to TWC Internal PO.

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 must be in the scope of original work. No verbal change orders will be permitted. All change orders must be in writing with a Purchase Order Change Notice (POCN) issued by Purchasing HUB Services.

Authorized Signature

Sonya Babley, CTCD, CTCM

Sonya Babley, CTCD, CTCM

04/23/2024



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Line-Sch:	Line Description:	PCA:	Class/Item:	Quantity:	UOM:	Unit Price:	Extended Amt:	Due Date:
1-1	ODG by MCG Health LLC Annual Subscription Renewal 06-03-24 to 06-02-25	13060	956/35	1.0000	EA	\$415.00000	\$415.00	04/22/2024
							Schedule Total	<input type="text" value="\$415.00"/>
Contract ID: 3124ITC052					ReqID: 0000046890			
							Item Total for Line # 1	<input type="text" value="\$415.00"/>

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.

IMPORTANT CONDITIONS OF ORDER
 This will be your authority to deliver, in accordance with instructions above and the terms of any existing contract agreement, accepted informal bid or quotation, the articles or services listed below. Containers, invoices and correspondence relative to this order must bear the purchase order number. Unless otherwise stipulated, freight charges are included in the unit price. If we previously agreed to pay transportation charges, shipments are to be made prepaid FOB destination and charges added to the invoice.
 * PAYMENT cannot be made until ALL items on this order are received, inspected and accepted unless we previously agreed to a partial payment.
 * ALL Invoices MUST match this PO by Line Number, Description, Quantity, Amount and include Delivery Date for Prompt Payment.
 * Purchase subject to TWC Terms and Conditions (Attachment I).

The State of Texas is exempt from all Federal Excise Taxes.
 Tax Exempt ID -742764775.
 STATE and CITY SALES TAX EXEMPTION CERTIFICATE: The undersigned claims an exemption from taxes under Texas Tax Code, Section 151.309(4), for purchase of tangible personal property described on this numbered order, purchased from contractor and/or shipper listed above, as this property is being secured for the exclusive use of the State of Texas.

Authorized Signature

Sonya Babley, CTCD, CTCM

Sonya Babley, CTCD, CTCM

04/23/2024