

N/A	rms: Freight Terms N/A TE: ADDITIONAL TE	N/A	PCC: D TIONS MA	PO Date: 04/18/2024 Y BE LISTED AT	PO End Date: THE END OF TH	PO Method: IT IE PURCHASE OF	Dispatch: Dispatch Via Prin RDER.	Rev Dt: t
Vendor:	CONSUMERINFOCC DBA EXPERIAN P O BOX 841971 LOS ANGELES CA 9 United States	-			Ship To:	44 RM AL	xas Workforce Comn 05 SPRINGDALE RD 1 414M STIN TX 78723 ited States	
					Bill To:	AF	PO@twc.texas.gov c	or
Vendor ID:	1954465932 003					10 RM	xas Workforce Comn 1 E 15TH ST 1 470	
Purchaser: Phone:	Kelly A Hall (737) 667-5150			AUSTIN TX 78778-0001 United States				
Fax: Email:	kelly.hall@twc.texas.	gov				ти	/C Prefers Electroni	c Submission
	ation: an corresponding Orde nce of this purchase or			TWC Standard Te	arms Conditions F	Pavised 01/30/202		apply to this
order.	nce of this purchase of	der, vendor agree	s that only			(evised 01/30/2020		
This purcha	ase is according to Del	egated AIS not on I	DIR contra	ct per 34 Texas A	dministrative Cod	e § 20.391.		
	cies are granted an ex),000. In other words, \$					0		

does not exceed \$10,000.

Requestor: Name: London Baird Tel: +1 (512) 936-4032 E-mail: london.baird@twc.texas.gov

Vendor Contact: Name: Customer Service Tel: 714 830 7000

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 Bebley, CTCD, CTCM							
Sonya Bebley, CTCD, CTCM	04/18/2024						



Line-Sch: 1-1	Line Description: Experian Identity Protection Restoration Fee	PCA: 13069	Class/Item: 990/48	Quantity: 1.0000	UOM: LOT	Unit Price: \$2.12000	Extended Amt: \$2.12	Due Date: 04/18/2024
					<u>ReqID:</u>		Schedule Total	\$2.12
					000004	7030		
						Item 7	Fotal for Line # 1	\$2.12
Line-Sch: 2-1	Line Description: Experian Identity Protection Activation Fee	PCA: 13069	Class/Item: 990/48	Quantity: 1.0000	UOM: EA	Unit Price: \$21.16000	Extended Amt: \$21.16	Due Date: 04/18/2024
					<u>ReqID:</u> 000004	7030	Schedule Total	\$21.16
						Item 1	Fotal for Line # 2	\$21.16
						Т	otal PO Amount	\$23.28
	ts, Shipping papers, invoices a prized by Purchaser prior to Sh		ondence must b	e identified w	ith our Purcha	se Order Numb	er. Over shipments will	not be accepted
This will be quotation, th otherwise st FOB destina * PAYMENT * ALL Invoic * Purchase s	T CONDITIONS OF ORDER your authority to deliver, in acc e articles or services listed bel ipulated, freight charges are in tion and charges added to the cannot be made until ALL iter es MUST match this PO by Lir subject to TWC Terms and Co	low. Contai cluded in th invoice. ms on this on the Number nditions (At	iners, invoices a he unit price. If w order are receive , Description, Qu ttachment I).	nd correspond ve previously ed, inspected	dence relative agreed to pay and accepted	to this order mu transportation of unless we previ	ist bear the purchase of charges, shipments are ously agreed to a partia	der number. Unless to be made prepaid

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 Bebley, CTCD, CTCM	
Sonya Bebley, CTCD, CTCM	<u>04/18/2024</u>