STATE OF TEXAS
PURCHASE ORDER

1. Agency Name & No. **TEXAS STATE LIBRARY & ARCHIVES COMMISSION** 306 Tax Exempt agency of the Texas State Government	**4. Purchase Order No.** 306-17-8163	**12. HUB:** N/A	**13. Order Type:** Service
	5. PCC	**14. Vendor Identification No:** 3313313313-003	
2. Agency Billing Address **ACCOUNTING DEPARTMENT** Texas State Library & Archives Commission PO Box 12516 Austin, TX 78711-2516 Email invoices to: AP@tsl.texas.gov Phone: (512) 463-5473; Fax: (512) 475-0185	**6. Current Document No.** DT-9 **7. Document (order) amt** $116.00	**15. Vendor Address:** Department of Information Resources ITV Payments 300 W. 15th Street, Suite 1300 Austin, TX 78701	
*VENDOR MUST REFERENCE PURCHASE ORDER NUMBER ON ALL INVOICES OR INVOICE WILL BE RETURNED TO VENDOR. THIS PURCHASE HAS BEEN DETERMINED TO BE THE "BEST VALUE."	**8. REF DOC** **9. Service Period or Expected Delivery Date:** 9/2/2016	**16. Vendor Contact Info:** Jay Graves **Phone:** (512) 463-3291 **Fax:** **Email:** jay.graves@dir.texas.gov	
3. Destination of goods or service ***FOB Destination*** ***Receiving Hours: 7:30 AM - 4:00 PM*** Receiving Dock, Room G-007 Texas State Library & Archives Commission 1201 Brazos Street Austin, TX 78701	**10. Agency Contact:** Liz Kaska **Phone:** (512) 463-7989 **Email:** purchasing@tsl.texas.gov **Fax:** 5124753393		
	11. TSLAC Project Contact: **Phone:** **Email:**		

17. Description

Phone services for the following number:
ARIS TSR # 16080690

Work Orders are submitted by IRT via the DIR Portal. Please see attached documents.

This PO is for payment tracking purposes only.

18. SFX	INDEX	AY	COBJ	AOBJ	AMOUNT	INVOICE NO.
001	52141	17	7516	7506	$80.00	

19. Line No	20. Goods & Service	21. NIGP Code	22. Qty	23. Units	24. Unit Price	25. Extended Amt
1.	512-463-5445 - Reset voicemail password & PIN, Change name to Richard Gilreath	915-93	1	Each	$5.00	$5.00
2.	512-463-5445 - Move phone line from cubicle 116.03 (VP# V-28-1) to cubicle 116.01 (VP#V-26-1	915-76	1	Each	$40.00	$40.00
3.	512-463-7682 - Add voicemail box	915-76	1	Each	$35.00	$35.00

18. SFX	INDEX	AY	COBJ	AOBJ	AMOUNT	INVOICE NO.
002	52141	17	7962	7506	$36.00	

19. Line No	20. Goods & Service	21. NIGP Code	22. Qty	23. Units	24. Unit Price	25. Extended Amt
4.	512-463-7682 - Monthly charge for voicemail box	915-76	12	Each	$3.00	$36.00

INTERNAL PO ONLY **Grand Total** $116.00

26. Legal Cites: Interagency Cooperation Act as defined in the Texas Government Code, Title 7, Chapter 771

27. Division Tracking Number: ARIS 17-062

Per Texas Tax Code 151.309, the Texas State Library and Archives Commission is a tax-exempt agency.
If you need further proof of this, please contact the Agency Contact in box #10.

Confirmation of receipt is required, please sign box #29 and return signed PO via email: purchasing@tsl.texas.gov or fax: (512) 475-3393.

28. Approval Signature	Date	29. Vendor Signature	Date
Liz Kaska	9-1-2016		

RECEIVED
AUG 30 2016
PURCHASING

Texas State Library & Archives Commission
Purchase Requisition & Blanket/Non-PR Form

Fiscal Year **2017**

RUSH

☑ Purchase Requisition (PR) ☐ Blanket/Non-PR* ☐ AMENDMENT

*CFO Signature not required for blankets

PO # **306-17-8043**

Division Tracking # **ARIS-17-062**

Previous PO # **306-16-8026**

Requested Delivery Date: **9/1/2016**

If PR is a RUSH, must include requested delivery date

DUNS:

Federal Funds Note:

Vendor Name: **DIR-CCTS**

Address: **300 W. 15th Street, Suite 1300**

City, State, Zip: **Austin, TX 78701**

Phone: **512-463-3291** Fax:

Contact Name: **Jay Graves**

Email: jay.graves@dir.texas.gov

Vendor #:

SAM Expiration Date:

Item Description	Commodity Code	Qty	Unit	Unit Price	Total Amount	Index	Agency Object	Comp Object
512-463-5445 - Reset voicemail password and PIN / Change name to Richard Gilreath	915-93	1	each	$ 5.00	$ 5.00	52141	7506	7516
512-463-5445 - Move phone line from cubicle 116.03 (voice port #V-28-1) to cubicle 116.01 (voice port #V-26-1), for new employee	915-76	1	each	$ 40.00	$ 40.00	52141	7506	7516
512-463-7682 - Add voicemail box	915-76	1	each	$ 35.00	$ 35.00	52141	7506	7516
512-463-7682 - Monthly charge for voicemail box	915-76	12	Month(s)	$ 3.00	$ 35.00	52141	7506	7962
				Grand Total	$ 115.00	*Don't forget to include S&H!*		

Special Instructions: **Phone work requests are for Information Services. Deadline of September 1, 2016 has been requested because their new employee, Richard Gilreath, starts on September 1st.**

For training or outreach events: Please include or attach justification statement, login info, and/or registration form.

Division Proprietory Statement (to be filled out if service or commodity will not be competitively bid)

TSR# 16080690

Pamela Fuentes

1. Requestor or Contract Manager Signature (always required)

Pamela Fuentes **512-463-5508**

Type name & phone number of Requestor or Contract Manager

Pamela Fuentes 8/26/16

2. Purchasing Liaison Signature (always required) Date

Jelain Rush 8/26/16

3. Division Director Signature (always required) Date

6. Executive Signature (if required) Date

Norma Osborne 8/29/16

7. Chief Fiscal Officer (always requried)* Date

8. Human Resources (for training only) Date

Liz Kash 9-1-16

Ordered by Date

Texas State Library & Archives Commission
Purchase Requisition & Blanket/Non-PR Form

Fiscal Year **2017**

RUSH

☑ Purchase Requisition (PR) ☐ Blanket/Non-PR* ☐ AMENDMENT

*CFO Signature not required for blankets

PO # **306-17-8043**

Division Tracking # **ARIS-17-062**

Previous PO # **306-16-8026**

Requested Delivery Date: **9/1/2016**

If PR is a RUSH, must include requested delivery date

Vendor Name: **DIR-CCTS**

Address: **300 W. 15th Street, Suite 1300**

City, State, Zip: **Austin, TX 78701**

Phone: **512-463-3291** Fax:

Contact Name: **Jay Graves**

Email: jay.graves@dir.texas.gov

Vendor #:

DUNS:

SAM Expiration Date:

Federal Funds Note:

4. If IT related, send PR to Accessibility Team
For Accessibility Team:
ADA Compliant: (circle one) YES NO

9-2-16
Estimated Delivery Date

Bonni Cozza 8/27/16
5. Director or IRT (for IT & CCTS requests) Date

Received by (Signature) Date

CONFLICT OF INTEREST: Per Section 2155.003 of the Texas Government Code, by signing this PR, I certify that I have no interest in, or in any manner am personally connected with, the contract or bid to be awarded under this Purchase Requisition (PR) for the purchase of furnishing, supplies, materials, services, and/or equipment by TSLAC. I further certify that neither I nor any member of my family (spouse or dependent child), have nor will accept or receive from any person, firm or corporation to whom a contract or bid may be awarded, directly or indirectly, by rebate, gift, or otherwise, any money or other thing of value whatsoever, nor shall I/we receive any promise, obligation, or contract for future reward or compensation from any party. I acknowledge that I may be dismissed if it is discovered that I/we have violated the aforementioned statute.

If no vendor is designated by requestor on this PR, the Purchasing staff will notify all signatories for ratification of the above certification to ensure compliance with the statute.

Rev: 03/17/2016

Vendor Change Approvals:

Purchasing Signature Date

Please initial and date accordingly

1. 3. 5. 7.
2. 4. 6.

TEXAS STATE LIBRARY AND ARCHIVES COMMISSION

IT Supplemental Form

This form is to provide IRT, Support Service and Purchasing with tracking information about the IT equipment or software being purchased. Please include a copy of this form with your Purchase Requisition (PR). If there is more than one piece of equipment or software being replaced or installed in your division, please use the (+) button to add a line for each piece of equipment or software license. Feel free to contact Purchasing if you have any questions. Thanks!

Building: DeZavala Building

PR Tracking #: ARIS-17-062

		Current IT Equipment Info			New or Replacement IT Equipment Info		
	Assigned to:	Rm#/Cube#:	*Inventory #	Equipment Description	Equipment Description	^Installation Rm#/Cube#:	Notes:
+ -	Richard Gilreath	Room 116 / Cube #116.03		Phone line 512-463-5445 and phone	Phone line 512-463-5445 and phone	Room 116 / Cube #116.01	
	Special Instructions: Relocating phone line and phone from current cubicle to another for new employee starting on 9/1/2016.						

TSLAC Inventory Numbers will be assigned after the equipment has been received. Please update your divisions Property Inventory numbers after the equipment has been installed.

Quick Tips:

*Your TSLAC Property Inventory # is located on a TSLAC barcode label. For example, the Inventory number for a PC will have the following format: PCXXXX. If you cannot locate your Inventory #, please contact Support Services.

^This information will be used for installation of new equipment.

CAPITOL COMPLEX TELEPHONE SYSTEM-REQUEST FOR SERVICE (**COVER SHEET**)

TSR # _____ AUTHORIZED BY Richard Lopez TOTAL W.O. PAGES 3
DUE DATE 9/01/2016 or sip REQUESTED BY Pamela Fuentes PHONE NO. 3-5508
AGENCY/DIVISION NAME ARC/ARIS AGENCY / DIV. CODE(6 DIGIT) **30652141**
LOCAL CONTACT Richard Lopez BLDG. LDZ ROOM NO. G-4 TEL. NO. 3-5457

Brief description of the work to be done:

Due 09/01/16 or SIP please **Charge Acct #: 30652141**

Please make the following name change and voicemail PIN reset:

Number:	Name:
463-5445	GILREATH, Richard

Please make the following phone line move:

	Number:	Jack#	Port:	Room:
FROM:	463-5445	V-28-1	01.2.01.03	116.03
TO:	463-5445	V-26-1	n/a	116.01

Please add a voicemail box for an existing phone line:

Number:	Name:
463-7682	DILLARD, Kaelyn

MATERIAL / EQUIPMENT REQUIREMENTS:

Type	New Telephone(s) Quantity	Reconditioned Telephone(s) Quantity	Telephone(s) For Exchange Quantity
Single Line Comdial			
Single Line (ITE-4)			
Multi Line 12+			
Multi Line 12S			
Multi Line 12 SD			
Multi Line 24B			
Multi Line 30 SD		N/A*	

*Agency must furnish phone

Remarks: _____

MISCELLANEOUS ITEMS

ITEM	QUANTITY	TYPE
HEADSET		(Over Ear/Over Head)
HANDSET CORD		(6,14,25 FT. Ash, Ivory, Grey)
LINE CORD		(6,14,25 Ft. Ash, Ivory, Grey)
OTHER		

CUSTOMER REF # _____

BY: _____ DATE: _____

DATE RECEIVED:(TIME STAMP)

(DIR TELECOMMUNICATIONS USE ONLY)

Total Hours Worked _____

Work Start Date: _____ Time Work Started: _____ Regular Hours Worked _____

Work Complete Date: _____ Time Work Finished: _____ Overtime Hours Worked _____

Customer Phone (Completed / Checked): ☐ Yes ☐ No Customer Signature: _____

Lead Technician: _____ Crew: _____

Coordinator Signature: _____ Date: _____

	Initial	Date		Initial	Date
Data Base Change			NetPlus Entry		
Data Base call-in			Directory Update		
Cabling			**DIR Billing Only** Reviewed		
Switchroom			Posted		

TELEPHONE MOVE REQUEST

TSR # _____ CR # _____ Page: 2 Of 3

Comments: _____
(If Necessary) _____

SERVICE - MUST SPECIFY										Drup/IDF & Cable DIR USE ONLY				
MOVE	Disc PORT	Disc DIRN	Name	Telephone Number	Mail	ACD	Port Number	Bldg./ Room #	Jack #	Drup	NetPlus	IDF	CABLE	CABLE PAIR
From			THOMPSON, Wendy	463-5445			01.2.01.03	116.03	V-28-1					
To			GILREATH, Richard	463-5445				116.01	V-26-1					
From														
To														
From														
To														
From														
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To														
From														
To														
A.	B.	C.	D.	E.	F.	G.	H.	I.		K.	L.	M.	N.	

Techs & Cabling Check + Date
Technician _____
Cabling _____

Data Base Check + Date
Initial work _____
Call-In work _____

NetPlus Entry _____
Cabling _____

Billing Check:
Reviewed _____
Posted _____

DIRECTORY NAME CHANGES

TSR # _____ CR # _____ DATE 8/29/2016 PAGE 3 OF 3

DUE DATE 9/1/2016 REQUESTED BY Pamela Fuentes PHONE NO. 3-5508

AGENCY/DIVISION NAME ARC/ARIS

LOCAL CONTACT Richard Lopez BLDG. LDZ ROOM NO. G004 TEL. NO. 3-5457

DIRECTORY NAMES ADD OR CHANGE

PHONE #	Display	ALL CAPITAL LETTERS - Example: DOE LAST NAME	PROPER CASE - Example: John Q. First Name & Middle Init
463-5445	☑ Yes ☐ *No	GILREATH	Richard
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		
	☐ Yes ☐ *No		

*** IF DISPLAY = NO - PLEASE PROVIDE AN ALTERNATIVE TELEPHONE NUMBER TO DISPLAY**

ALTERNATIVE TELEPHONE NUMBER TO DISPLAY

PHONE #	ALT. PHONE # TO DISPLAY	PHONE #	PHONE # TO DISPLAY

REMARKS: _____

	INITIAL	DATE		INITIAL	DATE
DATA BASE CHANGES			***DIR BILLING ONLY***		
NETPLUS ENTRY			BILLING REVIEWED		
DIRECTORY LISTING			BILLING POSTED		

RE: TSLAC - Name Change, Voicemail PIN Reset, Phone Liine Move and Add Voicemail Box Due 09/01/2016 or SIP

Re

CCTS Work Orders <cctswork@dir.texas.gov>

Mon 8/29/2016 12:48 PM

To:Richard Lopez <rlopez@tsl.texas.gov>;

Cc:Bonnie Cope <bcope@tsl.texas.gov>; Oscar Munoz <omunoz@tsl.texas.gov>;

TSR 16080690 DD 9/2 SIP WO3 306-17-001

Fiscal Year 2017 begins on September 1, 2016. Any work orders that will be due in September need to be created under FY 2017. (###-17-001)

Diane Williams
CCTS Customer Service Representative
Department of Information Resources
Communication Technology Services Division
512-463-9987

How are we doing? Let us know by taking our survey. https://www.surveymonkey.com/s/NK7ZDHF

From: Richard Lopez [mailto:rlopez@tsl.texas.gov]
Sent: Monday, August 29, 2016 10:15 AM
To: CCTS Work Orders <cctswork@dir.texas.gov>
Cc: Bonnie Cope <bcope@tsl.texas.gov>; Oscar Munoz <omunoz@tsl.texas.gov>
Subject: TSLAC - Name Change, Voicemail PIN Reset, Phone Liine Move and Add Voicemail Box Due 09/01/2016 or SIP

Brief description of the work to be done:

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Number:	Name:
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Please make the following phone line move:

	Number:	Jack#	Port:	Room:
FROM:	463-5445	V-28-1	01.2.01.03	116.03
TO:	**Number:**	**Jack#**	**Port:**	**Room:**
	463-5445	V-26-1	N/A	116.01

Please add a voicemail box for an existing phone line:

Number:	Name:
463-7682	DILLARD, Kaelyn