

# Department of State Health Services

## Purchase Order

Dispatch via Print

|  |   |                             |   |
|--|---|-----------------------------|---|
| <b>Payment Terms</b><br>Net 30   | <b>Freight Terms</b><br>Prepaid & Allow | <b>Ship Via</b><br>BEST WAY | <b>Purchase Order</b><br><b>HHSTX-3-0000288515</b>  |
| If advertised by informal bid, Invitation for Offer, or Request for Proposal; all specifications, terms, and conditions set forth in the advertisement and vendor's conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements. |   |                             | <b>Date</b><br>09/01/22   |
| <b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>   |   |                             | <b>Revision</b><br>Page<br>1  |
|  |   |                             | <b>Ship To:</b><br>4549 - San Antonio:6711 S New Brau<br>HEALTH & HUMAN SERVICES COMMISSION<br>6711 S New Braunfels<br>Ste 100<br>San Antonio TX 78223<br>United States |

**Vendor:** 1300688582 9  
ACADIAN AMBULANCE SERVICE INC  
PO BOX 98000  
LAFAYETTE LA 705098000  
United States

**Bill To:** Texas Center for Infectious Di  
DEPARTMENT OF STATE HEALTH SERVICES  
2303 SE Military Dr  
San Antonio TX 78223  
United States

**Purchaser:** Payne,Bruce

| Line-Sch | Inventory Item ID - Line Description | Class/Item | Quantity | UOM | PO Price | Extended Amt | Due Date |
|----------|--------------------------------------|------------|----------|-----|----------|--------------|----------|
|----------|--------------------------------------|------------|----------|-----|----------|--------------|----------|

FY23 funding  
SP/E  
Requisition 184157

Attached Terms and Conditions apply to this Purchase Order

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods actually ordered and received by the agency. Goods and/or services are to be delivered and invoiced after September 1, 2022. Any funds not utilized by 08-31-2023 are automatically canceled.

Vendor contact -  
VID 1300688582  
City of San Antonio City Clerk  
210-207-4214

TCID Facility contact  
Laura Longoria  
210-531-4570  
laura.longoria@dshs.texas.gov

PCS contact  
Bruce Payne  
512-406-2515  
bruce.payne@hhs.texas.gov

|     |                    |        |      |     |            |            |            |
|-----|--------------------|--------|------|-----|------------|------------|------------|
| 1-1 | EMS Transportation | 948-12 | 1.00 | LOT | 2500.00000 | \$2,500.00 | 09/01/2022 |
|-----|--------------------|--------|------|-----|------------|------------|------------|

**Schedule Total**                   \$2,500.00

**Item Total for Line 1**                   \$2,500.00

**Total PO Amount** \$2,500.00

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No substitutions or cancellations are permitted without prior approval by Health & Human Services Commission. If contractor fails to deliver by promised delivery date (or reasonable time thereafter) or fails to meet requirements, Health & Human Services Commission reserves the right to purchase elsewhere and charge an increased cost and handling to contractor.

Over shipments will not be accepted unless authorized by Buyer prior to shipment. The dispute resolution process provided for in Chapter 2260 of the Texas Government Code must be used by the Health & Human Services Commission and Contractor to attempt to resolve all disputes arising under the contract.

Performance under this purchase order is acceptance of the attached affirmations and terms and conditions.

**Authorized By**

*Bruce Payne, CTPM, CTCM*

05/13/2022