## **Department of State Health Services**

## **Purchase Order**

**Dispatch via Print** 

Payment Term	9	Ship Via		UUCTV 2 0000202100		
Net 30	Prepaid & Allow	BEST WAY	Purchase Order Date			
	If advertised by informal bid, Invitation for Offer, or Request for Proposal; all			Revision Page		
	terms, and conditions set forth in the ac		09/01/22	1		
	ponses become a part of this numbered		Ship To:	4546 - Austin:1100 W 49th St (DBGL		
2	guarantees goods or services delivered meet or exceed numbered purchase order			DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DBGL) PO Box 149347		
	requirements.					
	All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.					
with our rurti	lase Order Number.			Austin TX 78756		
			<u></u>	United States		
Vendor:	1760315568 4		Bill To:	Invoice-DSHS Fiscal Claims		
venuor.	MICROTEC SERVICES INC			DEPARTMENT OF STATE HEALTH SERVICES		
	110 CHARLES ST			1100 W 49th St (RBB)		
	PASADENA TX 77506-1205			PO Box 149347		
	United States			Austin TX 78756		
				United States		
			Fax:	512/458-7442		
			Email:	invoices@dshs.texas.gov		

Quantity

Purchaser:

**UOM** 

FY23 funding

SP/E

Line-Sch

Requisition 0000188395 Pricing per Quote \$2,290.00 PO Service Dates 09-01-2022 to 08-31-2023

Class/Item

Attached Terms and Conditions apply to this Purchase Order.

**Inventory Item ID - Line Description** 

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/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08-31-2023 are automatically canceled.

Vendor contact Quintin Stokley 713-475-2274 qstokley@sbcglobal.net

Agency contact Isaac Salazar 512-776-2367 Isaac.Salazar@dshs.texas.gov Facility: Laboratory

PCS contact Alicia Wells 512-406-2582 alicia.wells@hhs.texas.gov

1-1 992-55 32.00 EA 35.00000 \$1,120.00 09/01/2022

FY'23 BI-ANNUAL ELECTRON TESTING TO BE PERFORMED 32 LEAK TESTS 9-1-22

 Schedule Total
 \$1,120.00

 Item Total for Line 1
 \$1,120.00

Wells, Alicia N

Extended Amt

**Due Date** 

PO Price

## **Department of State Health Services**

## **Purchase Order**

**Dispatch via Print** 

Payment Ter Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Dunch and Onder	HHSTX-3-00002931	22
If advertised specifications	by informal bid, Invitation for Offer, or Fig., terms, and conditions set forth in the ac	Request for Proposal; all Ivertisement and vendor's	Purchase Order Date 09/01/22		age 2
guarantees go requirements.	conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.  All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			4546 - Austin:1100 W 49th St (DBGL DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DBGL) PO Box 149347 Austin TX 78756 United States	
Vendor:	1760315568 4 MICROTEC SERVICES INC 110 CHARLES ST PASADENA TX 77506-1205 United States		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	ERVICES
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov	

				Purc	haser: Wells, Alicia	N	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
2-1	FY'23 BI-ANNUAL ELECTRON TESTING TO BE PERFORMED 32 TEST KITS 8-31-2023	992-55	32.00	EA	35.00000	\$1,120.00	09/01/2022
					Schedule Total	\$1,120.00	
					Item Total for Line 2	\$1,120.00	
3-1	SHIPPING/HANDLING FOR 9/1/22	963-39	1.00	LOT	25.00000	\$25.00	09/01/2022
					Schedule Total	\$25.00	
					Item Total for Line 3	\$25.00	
4-1	SHIPPING/HANDLING FOR 8/31/23	963-39	1.00	LOT	25.00000	\$25.00	09/01/2022
					Schedule Total	\$25.00	
					Item Total for Line 4	\$25.00	
					Total PO Amount	\$2,290.00	

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

Alicia Wells, CTCD, CTCM 06/30/2022