# **Department of State Health Services**

#### **Purchase Order**

**Dispatch via Print** 

Net 30	erms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-000030051	2
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.  All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			<b>Date</b> 09/16/22	Revision Pa	<b>ge</b> 1
			Ship To:	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:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 <b>United States</b>		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICE 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov	

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

PO BILL TO INFORMATION: DSHS ATTN: FISCAL DIVISION/ ACCOUNTS PAYABLE 1100 WEST 49TH STREET AUSTIN, TX 78756 FOR DSHS INTERNAL DELIVERY INFO: 4546

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

FREIGHT: F.O.B. Destination Freight Prepaid Allowed

DELIVERY: 30 Days After Receipt of PO

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday Friday except designated State Holidays

SHIP ATTENTION TO AGENCY CONTACT:

Paloma Delapaz

Phone Number/area code: 512-776-3476

E-mail address: Paloma.Delapaz@dshs.texas.gov

BUILDING: Laboratory Building, L114

FLOOR: 1st ROOM: L-114 Dock

Ship to Attn: First Last Name Building and Room number

Tower, Room 123

HHSC BUYER:

Darryl Manor, Purchaser CTCD

Temp Cell: Phone: (512) 406-2475 E-Mail Address: darryl.manor@hhs.texas.gov

VENDOR:

WorkQuest (formerly TIBH) Contact Name: Audrey Cedillo Email: Smartbuy@Tibh.Org Phone: (512) 451-8145

Smartbuy P. O. 23001644

## **Department of State Health Services**

#### **Purchase Order**

**Dispatch via Print** 

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	НН	STX-3-0000300512
specifications, term	formal bid, Invitation for Offer, or las, and conditions set forth in the ac	dvertisement and vendor's	<b>Date</b> 09/16/22	Revision	Page 2
guarantees goods or requirements.	ses become a part of this numbered r services delivered meet or exceed pping papers, invoices, and corre e Order Number.	numbered purchase order	Ship To:	4546 - Austin:1100 W DEPARTMENT OF ST 1100 W 49th St (DBGL PO Box 149347 Austin TX 78756 United States	CATE HEALTH SERVICES
	741976051 1		Bill To:	Invoice-DSHS Fiscal C	laims

WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB)

PO Box 149347 Austin TX 78756 United States

**Fax:** 512/458-7442

Email: invoices@dshs.texas.gov

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

Contract Details: # 645-S1

PURCHASING METHOD: EX/0

Purchase made under the Authority of Texas Government Code 771 for Interagency Purchases and Transactions

**REQUIREMENTS/LIMITATIONS:** 

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding.

Invoice per 34 TAC §20.487, amended effective May 1, 2022

Requisition 0000205661

1-1 645-33 20.00 CTN 78.39000 \$1,567.80 10/21/2022

PAPER, BOND, RECYCLED, WHITE, PREM NO. 4, 20 LB, LETTER, QTY PRICE BREAKS COMMODITY CODE: 64521411718 NIGP CODE: 64521 SUPPLIER PART NUMBER:

64521411718

Schedule Total \$1,567.80

FY23 2806 Paper

VID: 17419760511 Contractor: Workquest, Inc.

Contact Name: WorkQuest Customer Service Email: customerservice@workquest.com

Phone: (512) 451-8145

Address: 1011 East 53 1/2 Street Austin TX 78751

PO BILL TO INFORMATION:

DSHS ATTN: FISCAL DIVISION/ ACCOUNTS PAYABLE 1100 WEST 49TH STREET AUSTIN, TX 78756 FOR DSHS INTERNAL DELIVERY INFO: 4546

BUILDING: Laboratory Building, L114

FLOOR: 1st ROOM: L-114 Dock

# **Department of State Health Services**

### **Purchase Order**

**Dispatch via Print** 

Payment To Net 30	erms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order		HHSTX-3-00	000300512
If advertised specification	by informal bid, Invitation for Offer, or Reconst, terms, and conditions set forth in the adve	quest for Proposal; all ertisement and vendor's	<b>Date</b> 09/16/22	Revision		Page 3
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.			Ship To:	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:	1741976051 1 WORKQUEST 1011 E 53RD 1/2 ST AUSTIN TX 787511703 United States		Bill To:	Invoice-DSHS Fis DEPARTMENT C 1100 W 49th St (R PO Box 149347 Austin TX 78756 United States	OF STATE HEALTH	I SERVICES
			Fax: Email:	512/458-7442 invoices@dshs.tex	as.gov	
			Purchaser:	Manor, Darryl Dw	ayne 51	2/406-2475
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
Requester P Requester E	OR INFO: Jame: Paloma Delapaz Hone Number/area code: 512-776-3476 -mail address: Paloma.Delapaz@dshs.texas Sion DSHS-Infectious Disease	.gov	Item Total !	for Line 1	\$1,567.80	
			I veni		Ψ1,007.00	

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	
Dand man CTP	09/16/2022

\$1,567.80

Total PO Amount