

# Department of State Health Services

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-3-0000301879</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> 10/04/22
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 1
			<b>Ship To:</b> 1902 - Temple:2408 S 37th St DEPARTMENT OF STATE HEALTH SERVICES 2408 S 37th St Temple TX 76504 United States

**Vendor:** 1263718834 8  
BULLCHASE INC  
201 S LAKELINE BLVD STE 503  
CEDAR PARK TX 786132741  
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

**Fax:** 512/458-7442  
**Email:** invoices@dshs.texas.gov

**Purchaser:** Mcmurtray,Nicole

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: 7 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

AGENCY CONTACT:  
Name: Heather Clark  
Email: Heather.Clark@dshs.texas.gov  
Phone: 254-771-6799

Purchaser Information:  
Name: Nikki McMurtray CTCD, CTCM  
Phone #512-776-6190  
Email Address: Nikki.McMurtray@hhs.texas.gov

VENDOR:  
Bullchase, Inc.  
3000 Polar Lane, Suite 703  
Cedar Park, Texas 78613  
888-558-2855 (phone)  
888-531-2929 (fax)  
service@bullchase.com

PURCHASING METHOD: CP/X

Procurement methods were evaluated, and the best value is provided using the TXMAS contract.

Txmas Contract: TXMAS-18-51V06  
Term:Start Date7/1/2018  
End Date 6/30/2023

Smartbuy PO: 23008768

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

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			<b>Page</b> 2

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**Purchaser:** Mcmurtray, Nicole

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Requisition 207957							
1-1	Insect Repellent Aerosol 6 oz Supplier Part Number: 4HK65	485-59	4.00	EA	5.78000	\$23.12	10/15/2022
<b>Schedule Total</b>						\$23.12	
<b>Item Total for Line 1</b>						\$23.12	
2-1	Rain Poncho Disposable Yellow Includes Hood Supplier Part Number: 1EJY3	345-74	4.00	EA	5.45000	\$21.80	10/15/2022
<b>Schedule Total</b>						\$21.80	
<b>Item Total for Line 2</b>						\$21.80	
<b>Total PO Amount</b>						\$44.92	

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.

<b>Authorized By</b>
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Miki Muntag, CEO, CCM

10/04/2022