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 | ISTX-3-0000302108 |
|---|----------------------------------|---|----------------------|-----------------------|-------------------|
| 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 | | | Date 10/06/22 | Revision | Page 1 |
| 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: 1906 - Houston:5425 Polk St DEPARTMENT OF STATE HEALTH SERV 5425 Polk St Ste 420 Houston TX 77023 United States | | | |
| Vendor: 176 | 50419172 0 | | Bill To: | Invoice-DSHS Fiscal C | Claims |

SOUTHEAST TEXAS REGIONAL ADVISORY

1111 NORTH LOOP W STE 160 HOUSTON TX 770085806

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

Ybarra, Diego Purchaser:

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

FY23 funding

SP/E

Requisition 0000207749 - Pricing per Invoice #: SYMP22-18

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/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 Michelle Maynor (281) 822-4463 Michelle.Maynor@setrac.org

Agency contact Isabel Duran Isabel.Duran@dshs.texas.gov (713) 767-3023

PCS contact Diego Ybarra, CTCD (512) 406-2480 Diego.Ybarra01@hhs.texas.gov

1.00 EA 350.00000 \$350.00 10/22/2022 1-1 963-40

Registration S Allen for 13th Annual RHPC Preparedness Coalition 11.2-4.22

> \$350.00 Schedule Total Item Total for Line 1 \$350.00

Total PO Amount \$350.00

Department of State Health Services

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| 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 | | | Date 10/06/22 | Revision Page 2 | |
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| | chase Order Number. | spondence must be identified | | Ste 420 Houston TX 77023 United States | |
| Vendor: | 1760419172 0 SOUTHEAST TEXAS REGIONAL 1111 NORTH LOOP W STE 160 HOUSTON TX 770085806 United States | ADVISORY | 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: Email: | 512/458-7442 invoices@dshs.texas.gov | |
| | | | Purchaser: | Ybarra,Diego | |

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.

Quantity

UOM

PO Price

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.

Class/Item

Line-Sch

Inventory Item ID - Line Description

Authorized By

10/06/2022

Extended Amt

Due Date