Department of State Health Services

Purchase Order

Dispatch via Print

Payment Term	ms Freight Terms	Ship Via			
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX	(-3-0000303556
specifications,	y informal bid, Invitation for Offer, or R terms, and conditions set forth in the ad	lvertisement and vendor's	Date 10/25/22	Revision	Page 1
guarantees goo requirements. All shipments	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:	1421301142 3 INTEGRATED DNA TECHNOLOG 25104 NETWORK PL CHICAGO IL 606731251 United States	GIES INC	Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE I 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	HEALTH SERVICES
			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

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

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

DELIVERY: 14 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: Rashmi Tuladhar 512 776-7784 rashmi.tuladhar@dshs.texas.gov

Ship to Attn: Rashmi Tuladhar Loading Dock: L-114 Building: Laboratory L-432

HHSC BUYER: Michael Fuentes, CTCD 512-287-1710

Michael.Fuentes@hhs.texas.gov

VENDOR:

INTEGRATED DNA TECHNOLOGIES INC 800-328-2661 X8754 CUSTCARE@IDTDNA.COM

QUOTE # QTE-212863

PURCHASING METHOD: SP/E Not to Exceed \$10,000.00

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#209204

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Payment Terr Net 30	ms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-0000303556
specifications,	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			Revision Page
guarantees goo requirements. All shipments	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
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			Fax: Email:	512/458-7442 invoices@dshs.texas.gov

				Purcha	ser: Fuentes, Michael	5	12/491-2879
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
1-1	11-01-02-02, IDTE PH 7.5(1X TE SOLUTION), 10X 2 ML	193-85	5.00	PKG	20.00000	\$100.00	10/25/2022
					Schedule Total	\$100.00	
				1	Item Total for Line 1	\$100.00	
2-1	EST SHIPPING/HANDLING CHARGES	962-86	1.00	LOT	22.00000	\$22.00	10/25/2022
					Schedule Total	\$22.00	
]	Item Total for Line 2	\$22.00	
					Total PO Amount	\$122.00	

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

Malffunt, CTPM

10/25/2022