Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHST	(-3-0000304668	
specifications, terms	rmal bid, Invitation for Offer, or s, and conditions set forth in the ac	dvertisement and vendor's	Date 11/09/22	Revision 1 - 11/9/2022	Page 1	
	es become a part of this numbered services delivered meet or exceed		Ship To:	1909 - Harlingen: 1301 S Rangervill DEPARTMENT OF STATE HEALTH SERVICES 1301 S Rangerville Rd		
All shipments, ship with our Purchase	ping papers, invoices, and corre Order Number.	espondence must be identified		Harlingen TX 78552 United States		
Vendor: 195	51040600 2		Bill To:	Invoice-DSHS Fiscal Claims		

BECKMAN COULTER INC 250 S KRAEMER BLVD BREA CA 928216232 **United States**

DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

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

512/406-2514 Call, Julie Ann

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

PRICING ON THIS PO REFLECTS CPI INCREASE OF 2.42% PRICING IS EFFECTIVE 11/25/2022 THRU 11/24/2023

FREIGHT: F.O.B DESTINATION FREIGHT PREPAID AND ALLOWED

SHIP ONLY UPON AGENCY REQUEST

ACCESS 2 IMMUNOASSAY ANALYZER S/N 510793 REAGENT RENTAL AT SOUTH TEXAS LABORATORY IN HARLINGEN

BCI AGREEMENT 57534US

PO SERVICE PERIOD: 9/1/22 THRU 11/24/22; REQ 185977/PO 299881(1ST QTR)

PO SERVICE PERIOD: 11/25/22 THRU 8/31/23 (NEW PRICING) FOR (2ND, 3RD AND 4TH QTR ALLOCATION); REQ 211358/PO 304668

BCI AGREEMENT 57534US SERVICE TERM: 10/06/2015 THRU 11/24/2023

BCI CUSTOMER NO: 5333 QUOTE NUMBER: 2015-82297413

GPO AFFILIATION: (COMMERCIAL) MEDASSETS/(GOVERNMENT) PREMIER

GOODS ARE NOT TO BE DELIVERED UNTIL REQUESTED BY AGENCY STAFF

REQUESTOR: BELINDA GARZA

PHONE: 956-364-8759

EMAIL: BELINDA.GARZA@DSHS.TEXAS.GOV

Cc: JEANNETTE DIANOVICH PHONE: 512-776-2122

EMAIL: JEANNETTE.DIANOVICH@DSHS.TEXAS.GOV

CONTRACT MANAGER: DARLENE WINZENRIED

PHONE: 512-776-6586

EMAIL: DARLENE.WINZENRIED@DSHS.TEXAS.GOV

PREVIOUS FY23 PO 299881

HHSC BUYER: JULIE CALL, CTCD, CTCM

512-406-2514 JULIE.CALL@HHS.TEXAS.GOV

Purchase Order

Ship Via

Class/Item

Dispatch via Print

Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	TX-3-0000304668	
specification conforming	by informal bid, Invitation for Offer, or I is, terms, and conditions set forth in the acresponses become a part of this numbered	lvertisement and vendor's purchase order. Contractor	Date 11/09/22 Ship To:	Revision 1 - 11/9/2022 1909 - Harlingen:1301 S	Page 2	
requirements All shipmen	oods or services delivered meet or exceeds. ats, shipping papers, invoices, and correscretase Order Number.		Smp 10.	DEPARTMENT OF STA' 1301 S Rangerville Rd Harlingen TX 78552 United States		
Vendor: 1951040600 2 BECKMAN COULTER INC 250 S KRAEMER BLVD BREA CA 928216232 United States		BECKMAN COULTER INC 250 S KRAEMER BLVD BREA CA 928216232		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:	Call.Julie Ann	512/406-2514	

UOM

PO Price

107.46000

Extended Amt

Due Date

\$2.764.44 11/25/2022

VENDOR: BECKMAN COULTER INC TIM ELLIS (REMOTE, SALES) CELL: 210-845-2548 TGELLIS@BECKMAN.COM

Line-Sch

1 1

Payment Terms

Freight Terms

Inventory Item ID - Line Description

NOTE: ORIGINALLY SOLICITED AS FORMAL IFB # HHS0012508 AND ISSUED A CPO WHICH LATER CANCELED DUE TO EXISITING GPO CONTRACT STILL IN EFFECT.

Quantity

PURCHASING METHOD: EX-0

PURCHASE MADE UNDER THE AUTHORITY OF TEXAS GOVERNMENT CODE 2155.1441 FOR HEALTH CARE PURCHASING INCLUDING GROUP PURCHASING PROGRAMS.

REQUISITION # 211358

DSHS ENTERS THIS CONTRACT UNDER THE AUTHORITY OF SECTIONS 2155.144(B-1) (2) AND 2155.1441(A) OF THE TEXAS GOVERNMENT CODE, AND 1 TEX. ADMIN. CODE §391.205(B)(9).

LEGAL CITE 2155.1441: CLIENT PURCHASE

GROUP PURCHASING PROGRAM: PURCHASES BY STATE OWNED HOSPITALS OR CLINICS THROUGH A GROUP PURCHASING PROGRAM COMPRISED OF TWO OR MORE HOSPITAL OR CLINIC FACILITIES.

14.00 KIT

REQUIREMENTS/LIMITATIONS:

THIS PO IS CONTINGENT UPON THE CONTINUED AVAILABILITY OF LAWFUL APPROPRIATIONS BY THE TEXAS LEGISLATURE FY23.

103 36

1-1	#33020 ACCESS FERRITIN 2 X 50 DET	193-36	14.00	KII	197.46000	\$2,764.44	11/25/2022
					Schedule Total _	\$2,764.44	
					Item Total for Line 1 _	\$2,764.44	
2-1	#33520 ACCESS HFSH 2 X 50 DET	193-36	14.00	KIT	225.12000	\$3,151.68	11/25/2022
					Schedule Total _	\$3,151.68	
					Item Total for Line 2	\$3,151.68	

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via		ппе	TX-3-0000304668	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	ппо	1 X-3-0000304000	
specifications, term	ormal bid, Invitation for Offer, or s, and conditions set forth in the ac	dvertisement and vendor's	Date 11/09/22	Revision 1 - 11/9/2022	Page 3	
guarantees goods or requirements.	ses become a part of this numbered r services delivered meet or exceed	numbered purchase order	Ship To:	1909 - Harlingen:1301 S Rangervill DEPARTMENT OF STATE HEALTH SERVICES 1301 S Rangerville Rd		
All shipments, ship with our Purchase	pping papers, invoices, and corre Order Number.	espondence must be identified		Harlingen TX 78552 United States		
Vendor: 19	51040600 2		Bill To:	Invoice-DSHS Fiscal Clair	ms	

BECKMAN COULTER INC 250 S KRAEMER BLVD BREA CA 928216232 **United States**

DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

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

Call, Julie Ann 512/406-2514 **Purchaser:** Class/Item Line-Sch **Inventory Item ID - Line Description** UOM PO Price Extended Amt Due Date Quantity 193-36 14.00 KIT 225.12000 \$3,151.68 **11/25/2022** #33510 ACCESS HLH 2 X 50 DET \$3,151.68 Schedule Total \$3,151.68 Item Total for Line 3 4-1 193-36 14.00 KIT 225.12000 \$3,151.68 **11/25/2022** #33530 ACCESS PROLACTIN 2 X 50 DET Schedule Total \$3,151.68 Item Total for Line 4 \$3,151.68 5-1 193-36 14.00 KIT 150.97000 \$2,113.58 **11/25/2022** #33810 ACCESS T-UPTAKE 2 X 50 DET Schedule Total \$2,113.58 Item Total for Line 5 \$2,113.58 150.97000 6-1 193-36 35.00 KIT \$5,283.95 **11/25/2022** #33800 ACCESS TOTAL T4 2 X 50 Schedule Total \$5,283.95 Item Total for Line 6 193-36 8.00 KIT 7-1 179.20000 \$1,433.60 **11/25/2022** #33525 ACCESS FSH CALIBRATORS Schedule Total ____ \$1,433.60 Item Total for Line 7 \$1,433.60 8-1 193-36 8.00 KIT 179.20000 \$1,433.60 **11/25/2022** #33025 ACCESS FERRITIN CALS

Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	TX-3-0000304668	
specifications, te	nformal bid, Invitation for Offer, or R rms, and conditions set forth in the ad	vertisement and vendor's	Date 11/09/22	Revision 1 - 11/9/2022	Page 4	
	conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order equirements.			Ship To: 1909 - Harlingen:1301 S Rangervill DEPARTMENT OF STATE HEALT 1301 S Rangerville Rd		
	hipping papers, invoices, and corres ase Order Number.	spondence must be identified		Harlingen TX 78552 United States		
Vendor:	1951040600 2		Bill To:	Invoice-DSHS Fiscal Claim		

BECKMAN COULTER INC 250 S KRAEMER BLVD BREA CA 928216232 United States DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

Item Total for Line 13 \$1,433.60

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

Call,Julie Ann 512/406-2514 **Purchaser:** Line-Sch **Inventory Item ID - Line Description** Class/Item UOM PO Price Extended Amt Due Date Quantity Schedule Total \$1,433.60 Item Total for Line 8 \$1,433.60 9-1 193-36 8.00 KIT 179.20000 \$1,433.60 **11/25/2022** #33515 ACCESS LH CALIBRATOR

Schedule Total ___ \$1,433.60 Item Total for Line 9 \$1,433.60 10-1 193-36 8.00 KIT 179.20000 \$1,433.60 **11/25/2022** #33535 ACCESS PROLACTN CALS Schedule Total \$1,433.60 **Item Total for Line 10** \$1,433.60 11-1 193-36 8.00 KIT 179.20000 \$1,433.60 **11/25/2022** #33815 ACCESS T UPTAKE CAL SO 1 Schedule Total \$1,433.60 **Item Total for Line 11** \$1,433.60 12-1 193-36 20.00 KIT 556.01000 \$11,120.20 **11/25/2022** #37200 ACCESS HYBRITECH PSA RGT KIT 2 X 50 Schedule Total \$11,120.20 Item Total for Line 12 _____ \$11,120.20 193-36 8.00 KIT 179.20000 13-1 \$1,433.60 **11/25/2022** #37205 ACCESS HYBRITECH PSA CAL KIT Schedule Total \$1,433.60

Purchase Order

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Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	Н	IHSTX-3-0000304668
specifications, terms	rmal bid, Invitation for Offer, or la, and conditions set forth in the ac	dvertisement and vendor's	Date 11/09/22	Revision 1 - 11/9/2022	Page 5
	es become a part of this numbered services delivered meet or exceed		Ship To:	1909 - Harlingen:13 DEPARTMENT OF 1301 S Rangerville I	STATE HEALTH SERVICES
All shipments, ship with our Purchase	ping papers, invoices, and corre Order Number.	espondence must be identified		Harlingen TX 78552 United States	
Vendor: 194	51040600 2		Bill To:	Invoice-DSHS Fisca	al Claims

BECKMAN COULTER INC 250 S KRAEMER BLVD BREA CA 928216232 **United States**

Bill To:

DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

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

				Purch	naser: Call,Julie	Ann 5	12/406-2514
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
14-1	#33880 ACCESS FREE T4, 2 X 50 DET	193-36	35.00	KIT	246.15000	\$8,615.25	11/25/2022
					Schedule Total	\$8,615.25	
					Item Total for Line 14	\$8,615.25	
15-1	#33885 ACCESS FREE T4 CALS S0-S5	193-36	11.00	KIT	179.20000	\$1,971.20	11/25/2022
					Schedule Total	\$1,971.20	
					Item Total for Line 15	\$1,971.20	
16-1	#33805 ACCESS TOTAL T4 CALS	193-36	11.00	KIT	179.20000	\$1,971.20	11/25/2022
					Schedule Total	\$1,971.20	
					Item Total for Line 16	\$1,971.20	
17-1	#A13422 ACCESS FT3 ASSAY, 2 X 50 DET ACCESS IMPROVED FT3 ASSAY	193-36	14.00	KIT	276.02000	\$3,864.28	11/25/2022
					Schedule Total	\$3,864.28	
					Item Total for Line 17	\$3,864.28	
18-1	#A13430 ACCESS FT3 CALS S0-S5 Price: \$ 179.20	193-36	14.00	KIT	179.20000	\$2,508.80	11/25/2022
					Schedule Total	\$2,508.80	
					Item Total for Line 18	\$2,508.80	
19-1	#81901 ACCESS REACTION VESSELS 16 X 98	193-36	22.00	KIT	144.88000	\$3,187.36	11/25/2022

Purchase Order

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Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHST	TX-3-0000304668
specifications, terms		dvertisement and vendor's	Date 11/09/22	Revision 1 - 11/9/2022	Page 6
guarantees goods or requirements.	pecifications, terms, and conditions set forth in the advertisement and vendor's conforming responses become a part of this numbered purchase order. Contractor parameters goods or services delivered meet or exceed numbered purchase order equirements. Il shipments, shipping papers, invoices, and correspondence must be identified			1909 - Harlingen:1301 S R DEPARTMENT OF STAT 1301 S Rangerville Rd	
with our Purchase		espondence must be identified		Harlingen TX 78552 United States	
Vendor: 193	51040600 2		Bill To:	Invoice-DSHS Fiscal Claim	18

BECKMAN COULTER INC 250 S KRAEMER BLVD BREA CA 928216232 **United States**

DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

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

Call,Julie Ann 512/406-2514 **Purchaser:** Line-Sch **Inventory Item ID - Line Description** Class/Item UOM PO Price Extended Amt Due Date Quantity Schedule Total **Item Total for Line 19** \$3,187.36 20-1 193-36 16.00 KIT 232.31000 \$3,716.96 **11/25/2022** #81906 ACCESS SUBSTRATE 4 X 130ML Schedule Total \$3,716.96 Item Total for Line 20 \$3,716.96 193-36 15.00 KIT 133.55000 \$2,003.25 **11/25/2022** 21-1 #81910 ACCESS SYSTEM CHECK SOLN, 6 X 4M Schedule Total \$2,003.25 Item Total for Line 21 \$2,003.25 22 - 1193-36 35.00 KIT 133.55000 \$4,674.25 **11/25/2022** #A16792 ACCESS WASH BUFFER II, 4 X 1950ML Schedule Total \$4,674.25 \$4,674.25 Item Total for Line 22 193-36 11.00 KIT 179.20000 23-1 \$1,971.20 **11/25/2022** #B63285 ACCESS TSH (3RD IS) CALS S0-S5 Schedule Total Item Total for Line 23 \$1,971.20 193-36 31.00 KIT 448.03000 \$13,888.93 **11/25/2022** #B63284 ACCESS TSH (3RD IS) 2 X 100 DET Schedule Total \$13,888.93

Purchase Order

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Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WA	Y	Purchase Order		HHSTX-3-000030466	
specification	by informal bid, Invitation for Offer, or Red s, terms, and conditions set forth in the adve	rtisement and vendor	r's	Date 11/09/22	Revision 1 - 11/9/2022	Pa	age 7
guarantees go requirements All shipmen	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:	1909 - Harlingen:1301 S Rangervill DEPARTMENT OF STATE HEALTH SERVICES 1301 S Rangerville Rd Harlingen TX 78552 United States		
Vendor:	Tendor: 1951040600 2 BECKMAN COULTER INC 250 S KRAEMER BLVD BREA CA 928216232 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: Email:	512/458-7442 invoices@dshs.te	xas.gov	
				Purchaser:	Call,Julie Ann	512/406-2514	
Line-Sch	Inventory Item ID - Line Description	Class/Item Q	uantity U	JOM	PO Price	Extended Amt Due Date	
				Item Total fo	or Line 24	\$13,888.93	
				Total Po	O Amount	\$87.711.49	

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

Tulie Call, CTPM, CTCM

11/14/2022