## **Department of State Health Services**

### **Purchase Order**

**Dispatch via Print** 

Payment Ter Net 30	rms Freight Terms FOB Dest. Prepaid & Add	Ship Via BEST WAY	Purchase Order		HHSTX-3-0000307065
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			<b>Date</b> 12/20/22	Revision	Page 1
guarantees go requirements All shipment	esponses become a part of this numbered pur bods or services delivered meet or exceed nur ts, shipping papers, invoices, and corresporchase Order Number.	mbered purchase order	Ship To:		Page 1 W 49th St (DBGL F STATE HEALTH SERVICES BGL)  Al Claims F STATE HEALTH SERVICES
Vendor:	zendor: 1222110786 0 ZEUS SCIENTIFIC 200 EVANS WAY BRANCHBURG NJ 088763767 United States		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICE 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	

Purchaser: Wherry, Valerie F 940/720-8479 Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity **UOM** PO Price **Extended Amt Due Date** 

Fax:

**Email:** 

512/458-7442

invoices@dshs.texas.gov

PLEASE REPLY TO CONFIRM RECEIPT OF THIS PURCHASE ORDER TO FAX NUMBER (940)720-8446 OR TO valerie.wherry@hhs.texas.gov

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

DELIVERY: 7-14 Days After Receipt of PO

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

AGENCY CONTACT: Linda Cao (512)776-7657

linda.cao@dshs.texas.gov

Ship to Attn: Linda Cao Loading Dock: L-114 Building: Laboratory L-401

HHSC BUYER: Valerie Wherry, CTCD (940)720-8479 valerie.wherry@hhs.texas.gov

VENDOR: Suzanne Hinton (719)510-7779 shinton@zeusscientific.com

PO Email to: orders@zeusscientific.com

QUOTE #Q-034903

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 0000214120

# **Department of State Health Services**

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Net 30	FOB Dest. Prepaid & Add	BEST WAY	Purchase Order			
If advertised by informal bid, Invitation for Offer, or Request for Proposal; all			<b>Date</b> 12/20/22	Revision	Page	
	specifications, terms, and conditions set forth in the advertisement and vendor's				2	
	conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order			4546 - Austin:1100 W 49th St (DBGL DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DBGL) PO Box 149347 Austin TX 78756		
requirements.						
	All shipments, shipping papers, invoices, and correspondence must be identified					
with our Purchase Order Number.						
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				United States		
				United States		
Vendor:	1222110786 0		Bill To:	Invoice-DSHS Fiscal Clai	ims	
	ZEUS SCIENTIFIC			DEPARTMENT OF STA	TE HEALTH SERVICES	
	200 EVANS WAY			1100 W 49th St (RBB)		
	BRANCHBURG NJ 088763767			PO Box 149347		
	United States			Austin TX 78756		
				United States		
			Fax:	512/458-7442		
			Email:	invoices@dshs.texas.gov		

				Purch	aser: Wherry, Valerie F	940/720-8479	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	<b>Due Date</b>
1-1	PART# 9Z9271G ZEUS ELISA MEASLES IGG TEST SYSTEM	193-36	2.00	EA	181.95000	\$363.90	01/06/2023
					Schedule Total	\$363.90	
					Item Total for Line 1	\$363.90	
2-1	PART# 9Z9281G ZEUS ELISA MUMPS IGG TEST SYSTEM	193-36	2.00	EA	181.95000	\$363.90	01/06/2023
					Schedule Total	\$363.90	
					Item Total for Line 2	\$363.90	
3-1	PART# ESTFREIGHT ESTIMATED SHIPPING	962-86	1.00	LOT	179.98000	\$179.98	01/06/2023
					Schedule Total	\$179.98	
					Item Total for Line 3	\$179.98	
					Total PO Amount	\$907.78	

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

Valerie Wheny, CTCD

12/20/2022