## **Department of State Health Services**

## **Purchase Order**

**Dispatch via Print** 

940/720-8479

**Due Date** 

**Extended Amt** 

Payment Te Net 30	rms Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHS	STX-3-0000308311	
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> 01/13/23	Revision	Page 1	
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.			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:	1562445503 4 VWR FUNDING INC DBA VWR INTERNATIONAL LLC PO BOX 640169 PITTSBURGH PA 15264-0169 United States		Bill To:	Bill To:  Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALT 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States		
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov	v	

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

Quantity

Purchaser:

**UOM** 

Wherry, Valerie F

PO Price

\*\*\*\*\*\*\*INTERNAL ONLY: ATTN: DSHS CLAIMS: SEND APPROVAL REQUESTS ONLY TO LABACCOUNTING@DSHS.TEXAS.GOV\*\*\*\*\*\*

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

**Inventory Item ID - Line Description** 

DELIVERY: 5-7 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

Class/Item

\*\*\*\*\*CHEMICALS AND REAGENTS MUST HAVE 12 MONTH MINIMUM EXPIRATION DATE UPON RECEIPT. NO MANUFACTURER SUBSTITUTIONS. \*\*\*\*\*

AGENCY CONTACT: Jennifer Thompson (512)776-7572

jennifer.thompson@dshs.texas.gov

FOR DSHS INTERNAL DELIVERY INFO:

**BUILDING: Laboratory L114** 

FLOOR: 3rd Room: L301

Line-Sch

CONTACT: Jennifer Thompson PHONE #: 512-776-7572

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

VENDOR:

Jill George (800)932-5000

PO Email to: customerservice@avantorsciences.com

QUOTE #8032030616

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

## **Department of State Health Services**

## **Purchase Order**

**Purchase Order** 

Ship Via

BEST WAY

**Payment Terms** 

Net 30

Freight Terms

Prepaid & Allow

**Dispatch via Print** 

HHSTX-3-0000308311

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> 01/13/23	Revision		Pag		
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:	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:	1562445503 4 VWR FUNDING INC DBA VWR INTERNATIONAL LLC PO BOX 640169 PITTSBURGH PA 15264-0169 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:	Wherry, Valerie F 940/720-8479					
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
This PO is Invoice per	MENTS/LIMITATIONS: contingent upon the continued availabilit 34 TAC §20.487, amended effective Ma 0000216437  97063-388 - VWR LIFE SCIENCE		opriations by	the Texas Legisl	976.58000	g. \$976.58	01/25/2023	
	TRYPTONE, VWR®, CASE OF (4) 1KG BOTTLES							
				\$	Schedule Total	\$976.58		
	1KG BOTTLES  MICALS AND REAGENTS MUST HAVE	12 MONTH MIN	IIMUM EXPI			·		
	1KG BOTTLES	12 MONTH MIN	IIMUM EXPI	RATION DATE U		ANUFACTURER		

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	01/13/2023