## **Department of State Health Services**

## **Purchase Order**

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via			10=1/ 0 00000000000000000000000000000000	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HI	HSTX-3-0000308736	
specifications, terms	rmal bid, Invitation for Offer, or, and conditions set forth in the a	advertisement and vendor's	<b>Date</b> 01/23/23	<b>Revision</b> 1 - 1/23/2023	Page 1	
guarantees goods or requirements.			Ship To:	1906 - Houston:5425 Polk St DEPARTMENT OF STATE HEALTH SERVICES 5425 Polk St Ste 420 Houston TX 77023 United States		
V J 165	0014762.2		Du T.	Invision DCHC Figural	Claima	

**Vendor:** 1650814762 2

QUICKSERIES PUBLISHING INC

SUITE 247

5100 NW 33RD AVE

FT LAUDERDALE FL 333096375

**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:** 512/458-7442

Email: invoices@dshs.texas.gov

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

FY23 Purchase / Requisition # 216325

Freight Terms: FOB Destination Prepaid and Add

Shipping Instructions: Ship according to the DUE DATES specified on the PO.

QUOTE #: 87626, attached.

Agency Delivery Contact: Margaret Torres @ 512-596-9463 Margaret.Torres@dshs.texas.gov

Purchaser Information:

Linda Rodriguez @ 512-406-2533 Linda.Rodriguez3@hhs.texas.gov

Vendor Information:

QuickSeries Publishing Inc. Jason Perkins @ 800-361-4653 Jason.perkins@quickseries.com

Procurement Method: SP/E

Requirements/Limitations:

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature.

INCLUDE P.O. NUMBER ON PACKING SLIPS, CARTONS, PACKAGES, BUNDLES, ETC.

1-1 715-10 500.00 EA 3.42000 \$1,710.00 02/23/2023

Code # 01-1425-100-01 - DSHS PHR 6/5S - PPE Donning and Doffing Guide - ISBN# 978-1-68423-331-1

 Schedule Total
 \$1,710.00

 Item Total for Line 1
 \$1,710.00

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Payment T Net 30	erms Freight Terms Prepaid & Allow	Ship Vi BEST V		Purchase Order	F	HSTX-3-00	000308736
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 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.				Date 01/23/23	<b>Revision</b> 1 - 1/23/2023		Page 2
				Ship To:	1906 - Houston:5425 Polk St DEPARTMENT OF STATE HEALTH SERVICES 5425 Polk St Ste 420 Houston TX 77023 United States		
Vendor:	1650814762 2 QUICKSERIES PUBLISHING INC SUITE 247 5100 NW 33RD AVE FT LAUDERDALE FL 333096375 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.texa	ıs.gov	
				Purchaser:	Rodriguez,Linda	51	2/406-2533
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
2-1	Code # 01-1425-100-01 - Setup fee and	966-42	1.00	EA	830.38000	\$830.38	02/23/2023

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.

Shipping fee

Authorized By

Finda Rodriguy, CTCB, CTCM

01/23/2023

Schedule Total

Item Total for Line 2

**Total PO Amount** 

\$830.38