

Health and Human Services Commission

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000311294
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.			Date 03/03/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 4517 - El Paso:4615 Alameda Ave DEPARTMENT OF STATE HEALTH SERVICES 4615 Alameda Ave El Paso TX 79905 United States
			Page 1

Vendor: 1043626476 5
MSDSOONLINE INC
27185 NETWORK PL
CHICAGO IL 606731271
United States

Bill To: Invoice-DSHS Accounts Payable
DEPARTMENT OF STATE HEALTH SERVICES
1200 E Brin
PO Box 70
Terrell TX 75160
United States

Fax: 972/551-8052
Email: DSHS.TSHBusinessOffice@dshs.texas.gov

Purchaser: Prince,Sheana Denea 512/406-2548

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY23 Funding
IT/D
NIGP 956/35
Requisition: 0000219274

PO Service Dates 03/03/2023 to 08/31/2023

Attached Terms and Conditions apply to this Purchase Order.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08/31/2023 are automatically canceled.

Vendor Contact:
MSDSOONLINE INC
Bernard Siliezar
(312) 881-2301
bsiliezar@ehs.com

Agency Contact:
Patricia Gonzalez
Patricia.Gonzalez1@hhs.texas.gov

PCS Contact:
Sheana Prince, CTCD
(512) 406-2548
Sheana.Prince@hhs.texas.gov

1-1	FY23 MSDSONLINE SUBSCRIPTION SERVICES FOR CF7-EPPC TERM: 4/28/2023 to 4/27/2024	956-35	1.00	LOT	5760.63000	\$5,760.63	03/03/2023
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Schedule Total	\$5,760.63
Item Total for Line 1	\$5,760.63

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Total PO Amount							\$5,760.63

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 <i>Sheana Prince, CTCO</i>	03/03/2023
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