Department of State Health Services

Purchase Order

Dispatch via Print

512/406-2548

Due Date

Extended Amt

Prince, Sheana Denea

PO Price

Payment Term Net 30	ns Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-0000312	234	
specifications, t	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			Revision	Page 1	
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:	1905 - Arlington:1301 S Bowen Rd HEALTH & HUMAN SERVICES COMMISSION 1301 S Bowen Rd Ste 200 Arlington TX 76013 United States		
Vendor:	1223695478 5 SHI GOVERNMENT SOLUTIONS INC STE 375 1301 S MO PAC EXPY AUSTIN TX 787466916 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		
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov		

Quantity

Purchaser:

UOM

FY23 Funding

Line-Sch

NIGP: 204/13

Requisition: 0000222117 (Lines 1 and 2)

PO Service Dates: 03/16/2023 to 08/31/2023

Inventory Item ID - Line Description

Quote #: 23177189

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.

Purchase order issued in accordance with Texas Government Code §2157.068, and DIR- CPO-5096.

Class/Item

Vendor Contact: SHI Government Solutions Inc Lauren Allen (732) 868-6210 lauren_allen@shi.com

Agency Contact: Samuel Savala (817) 264-4502 Samuel.Savala@dshs.texas.gov

Purchaser: Sheana Prince, CTCD (512) 406-2548

Sheana.Prince@hhs.texas.gov

Invoicing and Payment: The invoice shall contain all the following order to be considered for payment: PO number referenced, a unique invoice number, invoice date, and the total invoice amount. Each invoice shall also have an attached copy of the bill in order to be paid. Mail all original invoices to the BILL TO ADDRESS ON PO. Payment terms are net thirty days (30) unless a discount has been offered. Facility is not responsible for failure by the vendor to properly invoice which may delay payment processing.

Deliver to SHIP TO ADDRESS ON PO Please include PO NUMBERS ON PACKING SLIPS, CARTONS, PACKAGES, BUNDLES, ETC.

Freight Terms are FOB Destination Prepaid and Allowed/Add.

Department of State Health Services

Purchase Order

Purchase Order

Total PO Amount

\$8.00

Ship Via BEST WAY

Payment Terms Net 30 Freight Terms Prepaid & Allow **Dispatch via Print**

HHSTX-3-0000312234

Ship To: 1905 - Artington: 310 J Sween Rd	specification	by informal bid, Invitation for Offer, or Request, terms, and conditions set forth in the adversariance.	rtisement and ven	dor's	Date 03/16		ision		Page 2
SHI GOVERNMENT SOLUTIONS INC STEET 375 1301 S MO PAC EXPY AUSTIN TX 187466916 United States Fax: 512/458-7442 Email: invoices@dshs.texas.gov	requirements. All shipments, shipping papers, invoices, and correspondence must be identified			Ship	HEA 1301 Ste 2 Arlin	LTH & HUMAN S S Bowen Rd 200 agton TX 76013	H & HUMAN SERVICES COMMISSION owen Rd n TX 76013		
Email: invoices@dshs.texas.gov	SHI GOVERNMENT SOLUTION STE 375 1301 S MO PAC EXPY AUSTIN TX 787466916		IC DEPAR' 1100 W PO Box Austin T		pice-DSHS Fiscal Claims PARTMENT OF STATE HEALTH SERVICES OW 49th St (RBB) Box 149347 tin TX 78756				
Line-Sch Inventory Item ID - Line Description Class/Item Quantity UOM PO Price Extended Amt Due Date					I	E mail: invo	ices@dshs.texas.gov		
Delivery Hours: 8:00-11:30 AM and 1:00-4:30 PM Monday thru Friday except designated State Holidays when the Warehouse is closed 1-1 204-13 1.00 EA 4.00000 \$4.00 03/30/2023 C2G 2m USB Cable USB A to USB B Cable M/M USB cable USB (M) to USB Type B (M) USB 2.0-2 m black C2G Part#: 28102 Contract #: DIR-C P0-5096 [phw] Schedule Total 1.00 EA 4.00000 \$4.00 03/30/2023 2-1 204-13 1.00 EA 4.00000 \$4.00 03/30/2023 C2G 2m USB Cable USB A to USB B Cable M/M USB cable USB (M) to USB Type B (M) USB 2.0-2 m black C2G Part#: 28102 Contract #: DIR-C P0-5096 [core] Schedule Total \$4.00 \$4.00 \$5.00	Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity			•		
2-1	1-1	Cable M/M USB cable USB (M) to USB Type B (M) USB 2.0-2 m black C2G Part#: 28102 Contract #: DIR-C P0-5096	204-13	1.00	EA	4.00	0000	\$4.00	03/30/2023
2-1 C2G 2m USB Cable USB A to USB B Cable M/M USB cable USB (M) to USB Type B (M) USB 2.0-2 m black C2G Part#: 28102 Contract #: DIR-C P0-5096 [core] Schedule Total \$4.00 \$4.00 03/30/2023 \$4.00 03/30/2023						Schedule T	Total	\$4.00	
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Item Total for Line 2\$4.00						Schedule T	Total	\$4.00	
						Item Total for Li	ne 2	\$4.00	

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guarantees go requirements All shipmen	responses become a part of this numbered cods or services delivered meet or exceed ts, shipping papers, invoices, and correctate Order Number.	numbered purchase order	Ship To:	1905 - Arlington:1301 S Bo HEALTH & HUMAN SERV 1301 S Bowen Rd Ste 200 Arlington TX 76013 United States	
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			Fax: Email:	512/458-7442 invoices@dshs.texas.gov	
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	Purchaser:	Prince, Sheana Denea PO Price Extend	512/406-2548 led Amt Due Date

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

Sheana Prince, CTCD

03/16/2023