### **Department of State Health Services**

#### **Purchase Order**

**Dispatch via Print** 

Payment Terms	Freight Terms	Ship Via		11110:	TV 0 0000040004	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	TX-3-0000312804	
specifications, terms	rmal bid, Invitation for Offer, or , and conditions set forth in the a	dvertisement and vendor's	<b>Date</b> 03/22/23	Revision Page		
guarantees goods or requirements.  All shipments, ship	forming responses become a part of this numbered purchase order. Contractor rantees goods or services delivered meet or exceed numbered purchase order direments.  Shipments, shipping papers, invoices, and correspondence must be identified in our Purchase Order Number.			Ship To:  C732 - Austin:701 W 51st St HEALTH & HUMAN SERVICES COMMISSION 701 W 51st St PO Box 149030 Austin TX 78751 United States		
Vandam 122	22605479 5		Dill To.	Invoice UUSC MC2065		

**Vendor:** 1223695478 5

SHI GOVERNMENT SOLUTIONS INC

STE 375

1301 S MO PAC EXPY AUSTIN TX 787466916

**United States** 

Bill To: Invoice-HHSC MC2065

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

**Fax:** 512/206-4854

Email: IT\_invoicing@hhs.texas.gov

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

IT/I

Requisition 223957

PO Service Dates Apr-30-2023 to Apr-30-2024

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-TSO-4288, Quote 23200036

Vendor contact VID: 12236954785 SHI Government Solutions Jonathan Gaudet 800- 870-6079 opt. 2 Jonathan\_Gaudet@shi.com

Agency contacts: Jonathan Mora Jonathan.Mora@hhs.texas.gov

PCS contact Kathryn Persak 512-776-2910 kathryn.persak@hhs.texas.gov

1-1 920-45 1.00 YR 25935.00000 \$25,935.00 04/30/2023

JIRA SOFTWARE (CLOUD) STANDARD 400 USERS (ANNUAL PAYMENTS) RENEWAL ATLASSIAN PART#: ATL-JSWCLS-400R SERIAL#: SEN-16650879 SITE ADDRESS: HHSC-PHA.ATLASSIAN.NET

# **Department of State Health Services**

#### **Purchase Order**

**Dispatch via Print** 

Payment Terms Net 30	Freight Terms Prepaid & Allow	<b>Ship Via</b> BEST WAY	Purchase Order	HHSTX	-3-0000312804	
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> 03/22/23	Revision Pag		
guarantees goods or requirements.  All shipments, ship	g responses become a part of this numbered purchase order. Contractor goods or services delivered meet or exceed numbered purchase order		Ship To:  C732 - Austin:701 W 51st St HEALTH & HUMAN SERVICES COMM 701 W 51st St PO Box 149030 Austin TX 78751 United States		CES COMMISSION	
Vondor: 122	23605478 5		Bill To:	Invoice-HHSC MC2065		

1223695478 5 Vendor:

SHI GOVERNMENT SOLUTIONS INC

STE 375

1301 S MO PAC EXPY AUSTIN TX 787466916

**United States** 

Bill To:

Invoice-HHSC MC2065 HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St Austin TX 78751 United States

Fax: 512/206-4854

Total PO Amount

\$34,119.49

Email: IT\_invoicing@hhs.texas.gov

				Purcl	naser: Persak,Kathryn N	Л 5	12/776-2910
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	<b>Due Date</b>
					Schedule Total	\$25,935.00	
					Item Total for Line 1	\$25,935.00	
2-1	XRAY TEST MANAGEMENT FOR JIRA CLOUD FOR JIRA WORK MANAGEMENT (CLOUD) 400 USERS (ANNUAL PAYMENTS) RENEWAL ATLASSIAN PART#: ATL-MP- XRAYTMJCL-400R SERIAL #: SEN-16650879 SITE ADDRESS: HHSC- PHA.ATLASSIAN.NET	920-45	1.00	YR	7605.94000	\$7,605.94	04/30/2023
					Schedule Total	\$7,605.94	
					Item Total for Line 2	\$7,605.94	
3-1	CONFLUENCE (CLOUD) STANDARD 10 USERS (ANNUAL PAYMENTS) RENEWAL ATLASSIAN PART#: ATL-CONCLS-10R SERIAL #: SEN-16650879 SITE ADDRESS: HHSC- PHA.ATLASSIAN.NET	920-45	1.00	YR	578.55000	\$578.55	04/30/2023
					Schedule Total	\$578.55	
					Item Total for Line 3	\$578.55	

## **Department of State Health Services**

#### **Purchase Order**

**Dispatch via Print** 

512/776-2910

**Extended Amt** 

**Due Date** 

Payment Ter Net 30	ms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-0000312804
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.			<b>Date</b> 03/22/23	Revision Page 3
			Ship To:	C732 - Austin:701 W 51st St HEALTH & HUMAN SERVICES COMMISSION 701 W 51st St PO Box 149030 Austin TX 78751 United States
Vendor:	1223695478 5 SHI GOVERNMENT SOLUTIONS I STE 375 1301 S MO PAC EXPY AUSTIN TX 787466916 United States	INC	Bill To:	Invoice-HHSC MC2065 HEALTH & HUMAN SERVICES COMMISSION 4601 W Guadalupe St Austin TX 78751 United States
			Fax: Email:	512/206-4854 IT_invoicing@hhs.texas.gov

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

Quantity

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.

Class/Item

Line-Sch

**Inventory Item ID - Line Description** 

purchase elsewhere and charge an increased cost and handling to contractor.

**Authorized By** 

Purchaser:

**UOM** 

Hathrum Persak CTCD 03/23/2023

Persak, Kathryn M

**PO Price**