Department of State Health Services

Purchase Order

Dispatch via Print

512/406-2533

Due Date

Extended Amt

Payment Terms	Freight Terms	Ship Via		LUICTY O COCCO	40044
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-3-00003	13011
If advertised by info	If advertised by informal bid, Invitation for Offer, or Request for Proposal; all			Revision	Page
	s, and conditions set forth in the a		03/24/23		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:	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	
JO PC NI	35593032 9 OHN WILEY & SONS INC O BOX 22308 EW YORK NY 10087-0001 nited States		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERV 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States	VICES
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov	

Quantity

Purchaser:

UOM

Rodriguez,Linda

PO Price

FY23 Purchase / Requisition # 223847

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

Class/Item

FREIGHT: F.O.B. Destination Freight Prepaid and Add

Inventory Item ID - Line Description

DELIVERY: 10 Days After Receipt of PO

QUOTE #: via email, attached

Agency Delivery Contact: Erin Swaney @ 512-776-7185 Erin.Swaney@dshs.texas.gov

BUILDING: Laboratory L114 FLOOR: 4th, ROOM: L-429

Purchaser:

Line-Sch

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

Vendor:

John Wiley Sons Inc. dba The Leadership Challenge Patrick Allen @ 317-572-3093 pallen2@wiley.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.

1-1 715-48 1.00 EA 360.00000 \$360.00 04/05/2023

CLINICAL MICROBIOLOGY PROCEDURES HANDBOOK, MULTI-VOLUME, 5TH EDITION -HARDCOVER - ISBN: 978-1-683-

Department of State Health Services

Purchase Order

Ship Via

Payment Terms

Freight Terms

Dispatch via Print

HHSTX-3-0000313011

Net 30	Prepaid & Allow	BEST	WAY	Purchase Or	der	HHSTX-3-0	0003130 [,]		
pecification	d by informal bid, Invitation for Offer, ns, terms, and conditions set forth in the	ne advertisement and ve	endor's	Date 03/24/23	Revision		Pa		
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:	DEPARTMENT 1100 W 49th St PO Box 149347	Austin TX 78756			
endor:	1135593032 9 JOHN WILEY & SONS INC PO BOX 22308 NEW YORK NY 10087-0001 United States			Bill To:	Invoice-DSHS F DEPARTMENT 1100 W 49th St PO Box 149347 Austin TX 78750 United States	OF STATE HEALT (RBB)	H SERVICES		
				Fax: Email:	512/458-7442 invoices@dshs.te	exas.gov			
				Purchaser:	Rodriguez,Lind	a 5:	12/406-2533		
Line-Sch	Inventory Item ID - Line Descript	tion Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date		
	67398-9								
				5	Schedule Total	\$360.00			
				Item To	otal for Line 1	\$360.00			
2-1	SHIPPING	962-86	1.00	LOT	1.00000	\$1.00	04/05/2023		
				5	Schedule Total	\$1.00			
				Item To	otal for Line 2	\$1.00			
				Tot	al PO Amount	\$361.00			

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	
finda Rodriguez, CTC D, CTCM	
1 1 Section of the se	03/24/2023