Department of State Health Services

Purchase Order

Dispatch via Print

Thompson, Casandra

Extended Amt

Due Date

PO Price

Payment Te		Ship Via		ппс	STX-3-0000313207	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order Date			
	If advertised by informal bid, Invitation for Offer, or Request for Proposal; all			Revision	Page	
	s, terms, and conditions set forth in the ac		03/27/23		1	
_	responses become a part of this numbered		Ship To:	To: 4546 - Austin:1100 W 49th St (9th St (DBGL	
requirements	oods or services delivered meet or exceed	i numbered purchase order		DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DBGL)		
		anandanas must ba identified				
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				PO Box 149347		
with our Fu	Tenase Order Number.			Austin TX 78756		
				United States		
Vendor:	1061182317 9		Bill To:	Invoice-DSHS Fiscal Clai	ime	
venuoi.	ACCUSTANDARD INC		Dili 10.		TE HEALTH SERVICES	
	125 MARKET ST			1100 W 49th St (RBB)	TE TE TE TE SERVICES	
	NEW HAVEN CT 065133031			PO Box 149347		
	United States			Austin TX 78756		
				United States		
			Fax:	512/458-7442		
			Email:	invoices@dshs.texas.gov		

Quantity

Purchaser:

UOM

Ship to Attn: CHRISTOPHER JONES(L-641)

See above for Shipping and Invoice addresses

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

FREIGHT: F.O.B. Destination Freight Prepaid Allowed

Inventory Item ID - Line Description

DELIVERY: 5-12 Days After Receipt of PO

Delivery hours are from 8:00-11:30 AM and 1:00-4:30 PM Monday Friday except designated State Holidays

Class/Item

**SHIPPING: Item may be shipped together or separately but should be shipped upon availability from vendor. DO NOT DELAY shipping of individual items if waiting on other items not yet available.

AGENCY CONTACT:

Lab Contact: Christopher Jones, 512-776-3371, E-mail: Christopher.Jones@dshs.texas.gov Lab inquiries: Amy Deleon, 512-776-2457; Amy.deleon@dshs.texas.gov or LabAccounting@dshs.texas.gov

HHSC BUYER:

Line-Sch

Casandra Thompson, CTCD,

512-776-4243

Casandra.thompson@hhs.texas.gov

VENDOR CONTACT: VID: 1961182317

AccuStandard, Inc

Ph: (203) 786-5290, Press 2 Alt Ph: (800) 442-5290, Press 2

EmailL Orders@accustandard.com; customerservice@accustandard.com

QUOTE # 669283

PURCHASING METHOD: SP/E

Purchase not to exceed \$10,000.00. Rule 34 Texas Administrative Code § 20.41 - Delegated Purchases

REQUIREMENTS/LIMITATIONS:

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding.

Invoice per 34 TAC §20.487, amended effective May 1, 2022

Department of State Health Services

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Payment Terms	Freight Terms	Ship Via		HUCTV 2	0000242207	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	ппо і х-з-(0000313207	
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 03/27/23	Revision Pag		
			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		
Vendor: 106	51182317 9		Bill To:	Invoice-DSHS Fiscal Claims		

ACCUSTANDARD INC 125 MARKET ST NEW HAVEN CT 065133031

United States

DEPARTMENT OF STATE HEALTH SERVICES

1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States

512/458-7442 Fax:

Email: invoices@dshs.texas.gov

Thompson, Casandra Purchaser:

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

Requisition 0000222599

FOR DSHS INTERNAL DELIVERY INFO:

BUILDING: Laboratory L114 FLOOR: 6th Room: L-641

Requester name: Christopher Jones, 512-776-3371 E-mail: Christopher.Jones@dshs.texas.gov INTERNAL ONLY: ATTN: DSHS CLAIMS: Send approval request only to LabAccounting@dshs.texas.gov

1-1	M-502A-R-10X-PAK, ACCUSTANDARD-VOC LIQUIDS, 2.0 MG/ML IN MEOH 5/PAK	175-74	2.00	PKG	320.00000	\$640.00	04/07/2023
					Schedule Total	\$640.00	
					Item Total for Line 1	\$640.00	
2-1	S-91089 CUSTOM VOC STANDARD 5 1 ML	175-74	1.00	P10	770.00000	\$770.00	04/07/2023
					Schedule Total	\$770.00	
					Item Total for Line 2	\$770.00	
3-1	COLD PACKAGING MATERIAL	963-39	1.00	EA	5.00000	\$5.00	04/07/2023
					Schedule Total	\$5.00	
					Item Total for Line 3	\$5.00	
4-1	SHIPPING AND HANDLING	962-86	1.00	EA	125.50000	\$125.50	04/07/2023
					Schedule Total	\$125.50	
					Item Total for Line 4	\$125.50	
					Total PO Amount	\$1,540.50	

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Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-3-0000313207
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Vendor:	1061182317 9 ACCUSTANDARD INC 125 MARKET ST NEW HAVEN CT 065133031 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
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			Purchaser:	Thompson,Casandra
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price Extended 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
Cagnor Thangan, CTCD

03/27/2023