Purchase Order

Dispatch via Print

Chamorro, Gustavo A

Extended Amt

Due Date

PO Price

Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-00003135	547
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		Date 03/30/23	Revision F	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.			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	
1884129178 6 PERKINELMER US LLC 710 BRIDGEPORT AVE SHELTON CT 064844794 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	RVICES
		Fax: Email:	512/458-7442 invoices@dshs.texas.gov	
	Prepaid & Allow Informal bid, Invitation for Offer, or I ms, and conditions set forth in the acuses become a part of this numbered or services delivered meet or exceed hipping papers, invoices, and correse Order Number. 1884129178 6 PERKINELMER US LLC 710 BRIDGEPORT AVE SHELTON CT 064844794	Prepaid & Allow BEST WAY Informal bid, Invitation for Offer, or Request for Proposal; all Ims, and conditions set forth in the advertisement and vendor's Inses become a part of this numbered purchase order. Contractor In or services delivered meet or exceed numbered purchase order In pipping papers, invoices, and correspondence must be identified In see Order Number. In 1884129178 6 In PERKINELMER US LLC In ORIDGEPORT AVE IN SHELTON CT 064844794	Prepaid & Allow BEST WAY Informal bid, Invitation for Offer, or Request for Proposal; all ms, and conditions set forth in the advertisement and vendor's mses become a part of this numbered purchase order. Contractor or services delivered meet or exceed numbered purchase order Inipping papers, invoices, and correspondence must be identified see Order Number. Bill To: Bill To: Fax:	Prepaid & Allow BEŜT WAY Informal bid, Invitation for Offer, or Request for Proposal; all ms, and conditions set forth in the advertisement and vendor's mose become a part of this numbered purchase order. Contractor or services delivered meet or exceed numbered purchase order Inipping papers, invoices, and correspondence must be identified se Order Number. Bill To: Bill To: Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 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 Fax: 512/458-7442

Quantity

Purchaser:

UOM

Ship to Attn: DREW STOLPMAN (L-216)

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: 3-10 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

LAB AGENCY CONTACTS:

Lab: Drew Stolpman 512 776-6235; Drew.Stolpman@dshs.texas.gov

Lab inquiries: Amy DeLeon, 512-776-3735; amy.deleon@dshs.texas.gov or LabAccounting@dshs.texas.gov

HHSC BUYER:

Line-Sch

Gustavo Chamorro, CTCD, 512-406-2630 Gustavo.Chamorro@hhs.texas.gov

VENDOR CONTACT:

Tom Torcia 203-872-9232

 $thomastorcia@perkinelmer.com\ ; EHConsumableSales@PerkinElmer.com$

QUOTE # 22988551

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

Requisition 0000221923

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FOR DSHS INTERNAL DELIVERY INFO

Loading Dock: L-114 Building: Laboratory Room: L-216

Requester Information: Name: Drew Stolpman 512 776-6235 E-mail: Drew.Stolpman@dshs.texas.gov

***ATTN DSHS CLAIMS: Send approval requests only to LabAccounting@dshs.texas.gov ***

Purchase Order

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Payment Terms	Freight Terms	Ship Via			V 0 0000040545	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSI	X-3-0000313547	
specifications, terms	ormal bid, Invitation for Offer, or s, and conditions set forth in the a	dvertisement and vendor's	Date 03/30/23	Revision	Page 2	
	es become a part of this numbere services delivered meet or excee		Ship To:	4546 - Austin:1100 W 49th St (DBGL DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (DBGL)		
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				PO Box 149347 Austin TX 78756 United States		

Vendor: 1884129178 6

PERKINELMER US LLC 710 BRIDGEPORT AVE SHELTON CT 064844794

CAT: W1033612, NICKEL SAMPLER

CONE FOR NEXION

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

Fax: 512/458-7442

Email: invoices@dshs.texas.gov

Schedule Total

Item Total for Line 5

\$425.96 \$425.96

Chamorro, Gustavo A Purchaser: **Inventory Item ID - Line Description** Line-Sch Class/Item Quantity **UOM** PO Price Extended Amt Due Date 175-53 146.28000 1-1 1.00 EA \$146.28 04/12/2023 CAT: N0777046, TEFLON 0.25 ML SAMPLE LOOP Schedule Total \$146.28 \$146.28 Item Total for Line 1 2-1 175-53 1.00 EA 121.44000 \$121.44 04/12/2023 CAT: N8145568, CARRIER LINE 0.5MM ID 10CM LONG Schedule Total \$121.44 Item Total for Line 2 ____ \$121.44 175-53 1.00 EA 229.08000 \$229.08 04/12/2023 3-1 CAT: N0777287, HIGH FLOW ST NEB LINE FOR PORT 3 0.25 ID Schedule Total \$229.08 Item Total for Line 3 \$229.08 4-1 175-53 3.00 EA 251.16000 \$753.48 04/12/2023 CAT: N0777047, VACUUM LINE FOR SC-FAST HIGH FLOW VALVE Schedule Total \$753.48 Item Total for Line 4 \$753.48 1.00 EA \$425.96 04/12/2023 5-1 175-53 425.96000

Purchase Order

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Payment Terms	Freight Terms	Ship Via			
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSI	TX-3-0000313547
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		Date 03/30/23	Revision	Page 3	
	s become a part of this numbere services delivered meet or excee		Ship To:	n St (DBGL E HEALTH SERVICES	
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.				1100 W 49th St (DBGL) PO Box 149347 Austin TX 78756 United States	
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Vendor: 1884129178 6

PERKINELMER US LLC 710 BRIDGEPORT AVE SHELTON CT 064844794

United States

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DEPARTMENT OF STATE HEALTH SERVICES

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

Fax: 512/458-7442

Email: invoices@dshs.texas.gov

				Pur	chaser: Chamorro, C	Gustavo A	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
6-1	CAT: W1026356, NICKEL SKIMMER CONE FOR NEXION	175-53	5.00	EA	377.20000	\$1,886.00	04/12/2023
					Schedule Total	\$1,886.00	
					Item Total for Line 6	\$1,886.00	
7-1	CAT: W1033995, HYPERSKIMMER CONE FOR NEXION	175-53	5.00	EA	233.68000	\$1,168.40	04/12/2023
					Schedule Total _	\$1,168.40	
					Item Total for Line 7	\$1,168.40	
8-1	CAT: 09902123, VITON O-RING, 0.614 ID X 0.070 WD	175-53	2.00	EA	23.00000	\$46.00	04/12/2023
					Schedule Total	\$46.00	
					Item Total for Line 8	\$46.00	
9-1	CAT: 09210011, TEFLON COATED O-RING 0.239 ID X 0.070 WD	175-53	4.00	EA	2.76000	\$11.04	04/12/2023
					Schedule Total	\$11.04	
					Item Total for Line 9	\$11.04	
10-1	CAT: N8145005, SV40BI EXHAUST FILTER KI	175-53	3.00	EA	494.04000	\$1,482.12	04/12/2023
					Schedule Total	\$1,482.12	
					Item Total for Line 10	\$1,482.12	

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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			Date 03/30/23	Revision	Page 4
guarantees goods or s requirements.	ervices delivered meet or exceeding papers, invoices, and corre	art of this numbered purchase order. Contractor ered meet or exceed numbered purchase order invoices, and correspondence must be identified		4546 - Austin:1100 W 49t DEPARTMENT OF STAT 1100 W 49th St (DBGL) PO Box 149347 Austin TX 78756 United States	

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				Pur	chaser: Chamorro	,Gustavo A	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
11-1	CAT: W1036712, NexION Instrument Filter (left)	175-53	3.00	EA	105.80000	\$317.40	04/12/2023
					Schedule Total	\$317.40	
					Item Total for Line 11	\$317.40	
12-1	CAT: W1036713, NexION Instrument Filter (Back Right)	175-53	3.00	EA	105.80000	\$317.40	04/12/2023
					Schedule Total	\$317.40	
					Item Total for Line 12	\$317.40	
13-1	CAT: N8145051, NexION Setup Solution 1 ug/L 500mL	175-53	3.00	EA	155.48000	\$466.44	04/12/2023
					Schedule Total	\$466.44	
					Item Total for Line 13	\$466.44	
14-1	CAT: N8145059, SOLUTION NEXION DUAL DETECTOR	175-53	3.00	EA	199.64000	\$598.92	04/12/2023
					Schedule Total	\$598.92	
					Item Total for Line 14	\$598.92	
15-1	SHIPPING	962-86	1.00	EA	232.00000	\$232.00	04/12/2023
					Schedule Total	\$232.00	
					Item Total for Line 15	\$232.00	
					Total PO Amount	\$8,201.96	

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Payment Ter	rms Freight Terms	Ship Via	a			
Net 30	Prepaid & Allow	BEST W	VΑY	Purchase Order	HHSTX-3-0000313547	
specifications	by informal bid, Invitation for Offer, or F s, terms, and conditions set forth in the ad esponses become a part of this numbered	vertisement and ven	dor's	Date 03/30/23	Revision Page 5	
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				Fax: Email:	512/458-7442 invoices@dshs.texas.gov	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Ouantity	Purchaser: UOM	Chamorro,Gustavo A 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

03/30/2023