## **Department of State Health Services**

## **Purchase Order**

**Dispatch via Print** 

512/406-2533

**Due Date** 

Extended Amt

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-3-	-0000313966	
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> 04/05/23	Revision Page		
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:	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States		
						S0 82 P1
			Fax: Email:	512/458-7442 invoices@dshs.texas.gov		

Quantity

**Purchaser:** 

**UOM** 

Rodriguez,Linda

PO Price

FY23 Purchase / Requisition # 219636

Freight Terms: FOB Destination Prepaid and Add

**Inventory Item ID - Line Description** 

Shipping Instructions: Ship according to the DUE DATES specified on the PO.

QUOTE #: Q16991, attached.

Line-Sch

Agency Delivery Contact: Rebecca Waldron @ 512-231-5609 Rebecca.Waldron@dshs.texas.gov

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

Vendor Information: South Central Supply Hope @ 512-367-0311 Sales@supplytexas.com

Procurement Method: SP/E

Requirements/Limitations:

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

Class/Item

INCLUDE P.O. NUMBER ON PACKING SLIPS, CARTONS, PACKAGES, BUNDLES, ETC.

\$2,772.00 04/17/2023 1-1 475-27 11.00 BOX 252.00000 Item # MT-S100 - MicroTally Swabs (Pack of 100) Schedule Total \$2,772.00 \$2,772.00 Item Total for Line 1 2-1 962-86 1.00 LOT 120.00000 \$120.00 04/17/2023

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guarantees g requirements All shipmen	responses become a part of this numbered purpoods or services delivered meet or exceed nuss.  ats, shipping papers, invoices, and correspurchase Order Number.	umbered purchase order	Ship To:	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States	
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 <b>United States</b>		Bill To:	Invoice-DSHS Fisc DEPARTMENT OI 1100 W 49th St (RI PO Box 149347 Austin TX 78756 United States	F STATE HEALTH SERVICES
			Fax: Email:	512/458-7442 invoices@dshs.texa	is.gov
			Purchaser:	Rodriguez,Linda	512/406-2533
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt Due Date
	Shipping cost				
			Sche	dule Total	\$120.00
			Item Total	for Line 2	\$120.00
			Total Po	O Amount	\$2,892.00

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, CTCB, CTCM 04/05/2023