

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-3-0000314318
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.			Date 04/11/23
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 1905 - Arlington:1301 S Bowen Rd HEALTH & HUMAN SERVICES COMMISSION 1301 S Bowen Rd Ste 200 Arlington TX 76013 United States
			Page 1

Vendor: 1760823560 6
ACCUVEIN INC
DEPT CH 16850
PALATINE IL 600550001
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

Purchaser: Rodriguez,Linda 512/406-2533

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY23 Purchase / Requisition # 225673

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

DELIVERY: 10-14 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

QUOTE # QR-326625R, attached.

AGENCY CONTACT:
Cashyla Taylor @ 817-264-4533
Cashyla.Taylor@dshs.texas.gov

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

VENDOR:
Accuvein Inc.
Jere White @ 210-557-6650
jcwhite@accuvein.com

PREMIER GPO and DSHS Contract # HHS000722100001

PREMIER GPO and Accuvein Inc. Contract # PP-NS-1447.

Purchasing Method: EX/0
Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

Not to Exceed \$50,000.00 unless solicited

PURCHASE MADE UNDER THE AUTHORITY OF TEXAS GOVERNMENT CODE 2155.144(b); (b-) FOR CLIENT SERVICES.

Requirements/Limitations:
This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2024 funding.

Include P.O. Number on Packing Slips, Cartons, Cartons, Packages, Bundles, etc.

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1-1	ITEM# AV500 - Vein Visualization System (incl charging cradle, power supply, and manual) - Pricing includes handling charges.	465-01	5.00	EA	5145.00000	\$25,725.00	05/15/2023
Schedule Total						\$25,725.00	
Item Total for Line 1						\$25,725.00	
2-1	Handling Charge	962-86	1.00	EA	30.00000	\$30.00	05/15/2023
Schedule Total						\$30.00	
Item Total for Line 2						\$30.00	
Total PO Amount						\$25,755.00	

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

Linda Rodriguez, CTCS, CTCM

04/25/2023