Purchase Order

Dispatch via Print

Payment Terms	Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order		HHSTX-3-0000316768	
specifications, term	ormal bid, Invitation for Offer, or s, and conditions set forth in the a	dvertisement and vendor's	Date 05/09/23	Revision	Page 1	
	ses become a part of this numbered r services delivered meet or exceed		Ship To:	ip To: 3323 - Wichita Falls:1328 Oakhurst HEALTH & HUMAN SERVICES COMMISSION 1328 Oakhurst Dr		
All shipments, ship with our Purchase	oping papers, invoices, and corre Order Number.	espondence must be identified		Wichita Falls TX 7 United States		
Vendor: 12	32942737 6		Bill To:	Invoice - HHSC		

FISHER SCIENTIFIC COMPANY LLC

PO BOX 404705

ATLANTA GA 303844705

United States

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St PO Box 149030 Austin TX 78751 United States

Fax: 512/438-2086

HHSC_AP@hhsc.state.tx.us **Email:**

512/406-2478 Meads, Courtney Purchaser: Line-Sch **Inventory Item ID - Line Description** Class/Item **UOM** PO Price Quantity Extended Amt **Due Date**

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

DELIVERY: 14 Days After Receipt of PO

Delivery hours are from Monday to Friday 9 a.m. - 4 p.m.

QUOTE # 3122-7732-51 3124-7776-44

AGENCY CONTACT: Brandy Rangel Brandy.Rangel@hhs.texas.gov (940) 235-1779 1328 Oakhurst Dr. Mail Code 3323 Wichita Falls, TX 76302-2722

Janelle Holder Janelle.Holder@hhs.texas.gov (682) 802-1672

HHSC BUYER: Courtney Meads CTCD, CTCM 512-406-2478 Courtney.meads@hhs.texas.gov

VENDOR:

Matt Sullivan Account Executive Fisher Healthcare Thermo Fisher Scientific Phone (713) 806-5231 | Customer Service 1-800-640-0640 Matt.sullivan@thermofisher.com

PREMIER GPO and HHS Contract # HHS000776400001 PREMIER GPO and Fisher Contract # PP-LA-508

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 \$1,000,000,.00

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 227174

Purchase Order

Payment Terms Freight Terms Ship Via Net 30 Prepaid & Allow BEST WAY				Durohaas ()rdor	HHSTX-3-0	000316769	
If advertised	advertised by informal bid, Invitation for Offer, or Request for Proposal; all			Purchase C Date	Revision	1111317-3-0	Pag	
specification	ns, terms, and conditions set forth in the	e advertisement and vered purchase order. C	endor's ontractor	05/09/23	2222 **** 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:	HEALTH & HU	3323 - Wichita Falls:1328 Oakhurst HEALTH & HUMAN SERVICES COMMISSION 1328 Oakhurst Dr Wichita Falls TX 76302 United States		
Vendor: 1232942737 6 FISHER SCIENTIFIC COMPANY LLC PO BOX 404705 ATLANTA GA 303844705 United States				Bill To:	HEALTH & HU 4601 W Guadalı PO Box 149030	Austin TX 78751		
				Fax: Email:	512/438-2086 HHSC_AP@hhs	sc.state.tx.us		
				Purchaser:	Meads,Courtne	ev 5	12/406-2478	
Line-Sch	Inventory Item ID - Line Descripti	on Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
1-1 2-1 3-1	Catalog # BNX195000, Abbott BinaxNOW COVID-19 Ag Card Catalog # 18568, PolyCo PolyWear Smooth Disposable Gowns, Blue, Sit Large	345-74 345-74 ze:	14.00 138.00	PCK	250.72000 Schedule Total Total for Line 1 20.00000 Schedule Total Total for Line 2 391.57000	\$3,510.08 \$2,760.00 \$2,760.00 \$2,760.00	05/09/2023 05/09/2023	
<i>J</i> 1	Catalog # B256041, BD Veritor Syst Flu A+B Kit, Quantity: 1 Kit		21.00		Schedule Total Total for Line 3	\$8,222.97	03/07/2023	
4-1	Catalog # B256040, BD Veritor Syst Group A Strep	345-74 em	16.00	PCK	100.73000	\$1,611.68	05/09/2023	
					Schedule Total	\$1,611.68		
				Item	Total for Line 4	\$1,611.68		
5-1	Catalog # B256038, BD Veritor Syst RSV (Respiratory Syncytial Virus) T Kit		16.00	PCK	383.20000	\$6,131.20	05/09/2023	

Schedule Total \$6,131.20

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Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HH;	STX-3-0000316768
specifications, term	ormal bid, Invitation for Offer, or as, and conditions set forth in the a	dvertisement and vendor's	Date 05/09/23	Revision	Page 3
	ses become a part of this numbered r services delivered meet or exceed		Ship To:	3323 - Wichita Falls:13 HEALTH & HUMAN S 1328 Oakhurst Dr	328 Oakhurst SERVICES COMMISSION
All shipments, shi with our Purchase	pping papers, invoices, and corre e Order Number.	espondence must be identified		Wichita Falls TX 76302 United States	2
Vendor: 12	232942737 6		Bill To:	Invoice - HHSC	

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PO BOX 404705

ATLANTA GA 303844705

United States

HEALTH & HUMAN SERVICES COMMISSION

4601 W Guadalupe St PO Box 149030 Austin TX 78751 United States

Fax: 512/438-2086

HHSC_AP@hhsc.state.tx.us Email:

				Purc	haser: Meads,Cour	rtney 51	12/406-2478
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
					Item Total for Line 5	\$6,131.20	
6-1	Catalog # B256066, BD Veritor Plus Analyzer, Data Management	345-74	2.00	EA	348.39000	\$696.78	05/09/2023
					Schedule Total	\$696.78	
					Item Total for Line 6	\$696.78	
7-1	Catalog # 23043151, FIA, SARS; Quidel; for Sofia 1 and Sofia 2	345-74	3.00	PCK	464.00000	\$1,392.00	05/09/2023
					Schedule Total	\$1,392.00	
					Item Total for Line 7	\$1,392.00	
8-1	Catalog # 23043086, Quidel Sofia 2 Fluorescent Immunoassay Analyzer	345-74	1.00	EA	1731.43000	\$1,731.43	05/09/2023
					Schedule Total	\$1,731.43	
					Item Total for Line 8	\$1,731.43	
9-1	Freight fee	963-39	1.00	EA	600.00000	\$600.00	05/09/2023
					Schedule Total	\$600.00	
					Item Total for Line 9	\$600.00	
					Total PO Amount	\$26,656.14	

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Payment To Net 30	erms Freight Terms Prepaid & Allow	Ship Vi BEST V		Purchase Order	H	HHSTX-3-0000316768	
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 05/09/23	Revision		
guarantees g requirement All shipmen	responses become a part of this numbered p goods or services delivered meet or exceed a s. nts, shipping papers, invoices, and correspondence Order Number.	numbered purchase	order	Ship To:	3323 - Wichita Fal HEALTH & HUM. 1328 Oakhurst Dr Wichita Falls TX 7 United States	AN SERVICES COMMISSION	
Vendor:	1232942737 6 FISHER SCIENTIFIC COMPANY LI PO BOX 404705 ATLANTA GA 303844705 United States	LC		Bill To:	Invoice - HHSC HEALTH & HUM. 4601 W Guadalupe PO Box 149030 Austin TX 78751 United States	AN SERVICES COMMISSION St	
				Fax: Email:	512/438-2086 HHSC_AP@hhsc.s	state.tx.us	
				Purchaser:	Meads,Courtney	512/406-2478	
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

Cantry Meads CTCD, CTCM

05/10/2023