Department of State Health Services

Purchase Order

Dispatch via Print

Payment Te	rms Freight Terms	Ship Via			IOTV 4 000000054
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	H	HSTX-4-0000322351
	by informal bid, Invitation for Offer, or		Date	Revision	Page
	s, terms, and conditions set forth in the a		09/01/23		1
guarantees governments All shipmen	responses become a part of this numbered cods or services delivered meet or exceed to the sample of	numbered purchase order	Ship To:	4546 - Austin:1100 W DEPARTMENT OF S 1100 W 49th St (DBC PO Box 149347 Austin TX 78756 United States	STATE HEALTH SERVICES
Vendor:	1954141306 8 QIAGEN INC PO BOX 5132 CAROL STREAM IL 601975132 United States	INC 5132 TREAM IL 601975132		Invoice-DSHS Fiscal DEPARTMENT OF S 1100 W 49th St (RBB PO Box 149347 Austin TX 78756 United States	STATE HEALTH SERVICES
			Fax: Email:	512/458-7442 invoices@dshs.texas.g	gov

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

SHIP ATTN: JENNIFER GONZALES

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

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

Freight Torme

DELIVERY: 2-5 Days After Receipt of PO Release

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

DSHS AGENCY CONTACT:

Lab: Jennifer Gonzales, 512-776-7594 Email: jennifer.gonzales@dshs.texas.gov

Lab inquiries: Tami Kenroy, 512-776-3293; tami.kenroy@dshs.texas.gov or LabAccounting@dshs.texas.gov

HHSC BUYER:

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

VENDOR CONTACT:

David Mack Mobile (682) 201-9228; Customer Service 800-426-8157 Email: David.Mack@qiagen.com; customercare-us@qiagen.com

QUOTE: 230714US01674101DM PURCHASING METHOD: SP/E Not to Exceed \$10,000.00

REQUIREMENTS/LIMITATIONS:

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

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

Requisition #0000222830

FOR DSHS INTERNAL DELIVERY INFO:

BUILDING: Laboratory Bldg L114 FLOOR: 5th ROOM: L501

CONTACT: Jennifer Gonzales PHONE: 512-776-7594 Email: jennifer.gonzales@dshs.texas.gov INTERNAL ONLY: ATTN: DSHS CLAIMS: Send approval request only to LabAccounting@dshs.texas.gov

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Ter Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	ННЅТХ	(-4-0000322351
specifications	by informal bid, Invitation for Offer, or R , terms, and conditions set forth in the ad	vertisement and vendor's	Date 09/01/23	Revision	Page 2
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:	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:	1954141306 8 QIAGEN INC PO BOX 5132 CAROL STREAM IL 601975132 United States		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE 1 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756	HEALTH SERVICES

Fax: 512/458-7442

invoices@dshs.texas.gov Email:

United States

Item Total for Line 3 \$400.00

				Doom	chaser: Chamorro,G	Yuataya A	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
1-1	QIA61904EA QIAAMP DSP VIRAL RNA MINI KIT (QIAGEN CAT # 61904) MINIMUM EXPIRATION DATE OF 12 MONTHS REQUIRED	175-13	10.00	KIT	332.94000	\$3,329.40	09/01/2023
					Schedule Total	\$3,329.40	
FIRST SHI	PMENT: 5 KITS DUE BY 11/01/2023						
SECOND S	HIPMENT: 5 KITS DUE BY 05/01/2024				Item Total for Line 1	\$3,329.40	
2-1	QIA61104EA - QIAAMP DSP DNA BLOOD MINI KIT (QIAGEN CAT # 61104) - MINIMUM EXPIRATION DATE OF 12 MONTHS REQUIRED	175-13	6.00	KIT	205.53000	\$1,233.18	09/01/2023
					Schedule Total	\$1,233.18	
FIRST SHI	PMENT: 3 KITS DUE BY 12/01/2023						
SECOND S	HIPMENT: 3 KITS DUE BY 07/01/2024				Item Total for Line 2	\$1,233.18	
3-1	ESTIMATED SHIPPING WILL BE ADDED AT INVOICING Dry Ice Chare per order \$29 (if dry ice is included Handling Fee Per order \$34.00 UPS Service at time of release. Hazmat Fee Ground estimated \$31 and Air \$47	962-86	1.00	LOT	400.00000	\$400.00	09/01/2023
					Schedule Total	\$400.00	

Department of State Health Services

Purchase Order

Dispatch via Print

Payment T	erms Freight Terms	Ship Via				
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-4-0000322351		
specification	d by informal bid, Invitation for Offer, or Re ns, terms, and conditions set forth in the adve	ertisement and vendor's	Date 09/01/23	Revision Pa		
guarantees g requirement All shipmer	responses become a part of this numbered p goods or services delivered meet or exceed n is. nts, shipping papers, invoices, and corresp archase Order Number.	umbered purchase order	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:	1954141306 8 QIAGEN INC PO BOX 5132 CAROL STREAM IL 601975132 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: 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		
Zinc-Scii	inventory teni ib - Line Description	Ciass/Item Quantity		PO Amount \$4,962.58		

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

07/19/2023