

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-4-0000328267 |
| 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 09/11/23 |
| All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number. | | | Revision 1 - 9/11/2023 |
| | | | Page 1 |
| | | | 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: 1363684738 9
ULINE INC
PO BOX 88741
CHICAGO IL 606801741
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: Chavez,Rafael

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

FY24 funding
IT/D

Requisition 0000241051
Quote: Website Pricing

PO Service Dates 09/11/2023 to 08/31/2024

Goods and/or services are to be delivered and invoiced after September 1, 2023.

Attached Terms and Conditions apply to this Purchase Order.

This purchase order is contingent upon the continued availability of lawful appropriations by the Texas Legislature and may be canceled at any time in whole or part without penalty. HHS or the agency does not commit to ordering specific quantities of goods/services or dollar amounts with respect to this purchase order. The agency shall be obligated to pay for only those goods and/or services ordered and received by the agency. Any funds not utilized by 08/31/2024 are automatically canceled.

DIR blanket exemption - Minimum Threshold Procurements

Vendor Contact Information:
1363684738
ULINE INC
Carlos Cuellar
800-295-5510
ccuellar@uline.com
customer.service@uline.com

Agency Contact:
Tami Kenroy
tami.kenroy@dshs.texas.gov

Salvador Arreola
512-776-6697
Salvador.Arreola@dshs.texas.gov

PCS Purchaser Contact:
Steven Chavez, CTCD, CTCM
Rafael.chavez@hhs.texas.gov

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-4-0000328267 |
| 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 09/11/23 |
| All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number. | | | Revision 1 - 9/11/2023 |
| | | | Page 2 |
| | | | 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: 1363684738 9
ULINE INC
PO BOX 88741
CHICAGO IL 606801741
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: Chavez,Rafael

| Line-Sch | Inventory Item ID - Line Description | Class/Item | Quantity | UOM | PO Price | Extended Amt | Due Date |
|------------------------------|-------------------------------------------------------------------------------------------------------|------------|----------|-----|-----------|--------------|------------|
| 1-1 | ZEBRA ZD421D DESKTOP DIRECT THERMAL BARCODE PRINTER - 203 DPI - MANUFACTURER# ZD421D - MODEL# H-9579, | 204-82 | 6.00 | EA | 485.00000 | \$2,910.00 | 09/22/2023 |
| Schedule Total | | | | | | \$2,910.00 | |
| Item Total for Line 1 | | | | | | \$2,910.00 | |
| Total PO Amount | | | | | | \$2,910.00 | |

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.

| | |
|----------------------------------------------------------------------------------------------------|--------------------------|
| <p>Authorized By</p> <p style="text-align: center;"><i>Steven Chavez</i> CTCD, CTCH</p> | <p>09/11/2023</p> |
|----------------------------------------------------------------------------------------------------|--------------------------|