Department of State Health Services

Purchase Order

Dispatch via Print

Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	HHSTX-4-0000328418
specification	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. All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 1
guarantees gorequirements All shipmen				6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
Vendor: 1131628688 6 AMERICAN PUBLIC HEALTH ASSOCIATIO 800 I ST NW WASHINGTON DC 200013710 United States		SSOCIATION	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
			Purchaser:	Garcia,Reachell

Quantity

UOM

PO Price

Extended Amt

Due Date

FY24 funding SP/E Requisition 0000241382 Pricing per Quote \$75.00 PO Service Dates 09-13-2023 to 08-31-2024 Goods and/or services are to be delivered and invoiced after September 1, 2023

Class/Item

FY24 APHA Membership Registration for Ronald Stokes-Walters.

Attached Terms and Conditions apply to this Purchase Order.

Inventory Item ID - Line Description

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.

Vendor: Send invoices to DSHS Invoices email address (invoices@dshs.texas.gov)

Vendor contact American Public Health Association 202-777-2400 Membership.mail@apha.org

Line-Sch

Agency contact Michelle Castillo 512-776-3646 Michelle.castillo@dshs.texas.gov

1-1

PCS contact
Reachell Garcia
Reachell.garcia@hhs.texas.gov
Quote FY24 APHA Membership Registration for Ronald Stokes-Walters.

963-48

APHA Membership Registration for Ronald Stokes-Walters

1.00 EA

 Schedule Total
 \$75.00

 Item Total for Line 1
 \$75.00

\$75.00

10/01/2023

75.00000

Department of State Health Services

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			Purchaser:	Garcia,Reache	ell	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Ouantity	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
Reachell Line

Total PO Amount

09/13/2023

\$75.00