

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-4-0000335942
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 01/03/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 1 - 1/3/2024
			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: 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: 512/458-7442
Email: invoices@dshs.texas.gov

Exempt Reason: N/A

Purchaser: Angel, April Marie 512/406-2427

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: *****VERY IMPORTANT NOTE TO VENDOR: Blanket PO. Do NOT ship entire order upon receipt of PO. Only release certain items upon the request by authorized DSHS Staff.*****

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

AGENCY CONTACT:
 Nachea Qualls
 512-776-7491
 Nachea.Qualls@dshs.texas.gov

Deliver To:
 BUILDING: Laboratory Bldg L114
 FLOOR: 5th
 ROOM: L515
 ATTN: Nachea Qualls

HHSC BUYER:
 April Angel, CTCD
 512-406-2427
 April.Angel@hhs.texas.gov

VENDOR:
 Customer Service
 800-426-8157
 Order-us@qiagen.com
 Customercare-us@qiagen.com

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 #0000250565

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1-1	959034 EZ1 & 2 RNA TISSUE MINI KIT (48)	175-23	12.00	EA	\$674.00	\$8,088.00	01/11/2024
Schedule Total						\$8,088.00	
Item Total for Line 1						\$8,088.00	
2-1	ESTIMATED SHIPPING	962-86	1.00	LOT	508.08000	\$508.08	01/11/2024
Schedule Total						\$508.08	
Item Total for Line 2						\$508.08	
Total PO Amount						\$8,596.08	

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 <i>April Angel, CTCD</i>	01/05/2024
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