

# Department of State Health Services

## Purchase Order

Dispatch via Print

<b>Payment Terms</b> Net 30	<b>Freight Terms</b> Prepaid & Allow	<b>Ship Via</b> BEST WAY	<b>Purchase Order</b> <b>HHSTX-4-0000335947</b>
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.			<b>Date</b> 01/03/24
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 1
			<b>Ship To:</b> 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:** 1562190977 7  
NSI LAB SOLUTIONS  
625 BUNKER CT  
VERNON HILLS IL 60061-1830  
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:** Ogle, Tracie L

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: Line Item 1 to ship in February of 2024 - Line Item 2 to ship in August of 2024

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

AGENCY CONTACT:  
Amy Deleon  
Amy.deleon@dshs.texas.gov

Requester name: Chris Malota  
Rm: L-420  
Requester Phone Number/area code: 512-776-7611  
Requester E-mail: Chris.Malota@dshs.texas.gov

PO BILL TO INFORMATION  
DSHS  
ATTN: FISCAL DIVISION/ACCOUNTS PAYABLE  
1100 WEST 49TH STREET  
AUSTIN, TEXAS 78756  
CODE # 3063

FOR DSHS INTERNAL DELIVERY INFO:  
BUILDING: Laboratory L114  
FLOOR: 4th  
CONTACT: Chris Malota

THE 3RD THRU 5TH DIGITS OF THE PROJECT GRANT CODE:  
DEPARTMENT ID CODE: H41000  
PROGRAM CODE: 955  
INTERNAL DELIVERY CODE: 7959

PURCHASER:  
Tracie Ogle, CTCM, CTCM  
512-776-2326  
Tracie.Ogle@hhs.texas.gov

VENDOR:  
VENDOR NAME: NSI Lab Solutions

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<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 2
			<b>Ship To:</b> 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

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**Exempt Reason:** N/A

**Purchaser:** Ogle, Tracie L

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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ADDRESS: 7212 ACC Blvd.  
CITY/ZIP: Raleigh, NC 27617  
PHONE/FAX: 1-800-234-7837 / 1-919-789-3019  
VENDOR NUMBER AND LOC CODE: 1562190977  
LOCATION CODE:  
CONTACT NAME: David Tordai (David.Tordai@antylia.com) and nsi-nsilabsolutions@antylia.com

QUOTE NO. 5417 and 5418

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: 0000251204

1-1	PART NUMBER: FMPT-009-M; QUALITATIVE STEC PT (DI). MEAT MATRIX IN DUPLICATE *ECCN* (ALSO COMES WITH 2 COMPLIMENTARY DI WATERS)- SHIPS IN FEBRUARY OF 2024	175-53	1.00	EA	254.00000	\$254.00	02/12/2024
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**Schedule Total**                      \$254.00  
**Item Total for Line 1**                      \$254.00

2-1	PART NUMBER: FMPT-009-D; QUALITATIVE STEC PT (DI). DAIRY MATRIX IN DUPLICATE *ECCN* (ALSO COMES WITH 2 COMPLIMENTARY DI WATERS)- SHIPS IN AUGUST OF 2024	175-53	1.00	EA	196.00000	\$196.00	08/12/2024
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**Schedule Total**                      \$196.00

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<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</b> 3
			<b>Ship To:</b> 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

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Exempt Reason: N/A

**Purchaser:** Ogle,Tracie L

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
<b>Item Total for Line 2</b>						\$196.00	
3-1	ESTIMATED SHIPPING FOR LI 1	962-86	1.00	EA	81.00000	\$81.00	02/12/2024
<b>Schedule Total</b>						\$81.00	
<b>Item Total for Line 3</b>						\$81.00	
4-1	ESTIMATED HAZMAT FEE FOR LI 1	963-39	1.00	EA	10.00000	\$10.00	02/12/2024
<b>Schedule Total</b>						\$10.00	
<b>Item Total for Line 4</b>						\$10.00	
5-1	ESTIMATED SHIPPING FOR LI 2	962-86	1.00	EA	81.00000	\$81.00	08/12/2024
<b>Schedule Total</b>						\$81.00	
<b>Item Total for Line 5</b>						\$81.00	
6-1	ESTIMATED HAZMAT FEE FOR LI 2	963-39	1.00	EA	10.00000	\$10.00	08/12/2024
<b>Schedule Total</b>						\$10.00	
<b>Item Total for Line 6</b>						\$10.00	
<b>Total PO Amount</b>						\$632.00	

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**Exempt Reason:** N/A

**Purchaser:** Ogle, Tracie L

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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**

*Tracie Ogle, (FCD)*

**01/03/2024**