Department of State Health Services

Purchase Order

Dispatch via Print

| Payment Te Net 30 | erms Freight Terms Prepaid & Allow | Ship Vi BEST V | | Purchase Order | | HHSTX-4-0000336056 |
|---|--|--------------------|----------|-------------------------|---|--|
| specification | by informal bid, Invitation for Offer, or Re | ertisement and ver | ndor's | Date 01/04/24 | Revision | Page 1 |
| guarantees g requirements All shipmen | responses become a part of this numbered p goods or services delivered meet or exceed n s. ats, shipping papers, invoices, and corresp archase Order Number. | umbered purchase | e order | Ship To: | | 0 W 49th St (DBGL)F STATE HEALTH SERVICES BGL) |
| Vendor: | 1232942737 6 FISHER SCIENTIFIC COMPANY LL PO BOX 404705 ATLANTA GA 303844705 United States | .C | | Bill To: | Invoice-DSHS Fisd DEPARTMENT O 1100 W 49th St (R PO Box 149347 Austin TX 78756 United States | OF STATE HEALTH SERVICES |
| | | | | Fax: Email: | 512/458-7442 invoices@dshs.tex | as.gov |
| Exempt Rea | ason: GPO | | | Purchaser: | Ogle,Tracie L | |
| Line-Sch | Inventory Item ID - Line Description | Class/Item | Quantity | UOM | PO Price | Extended Amt Due Date |

FREIGHT: F.O.B DESTINATION FREIGHT PREPAID AND ALLOWED

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.

Agency Contact: Dene Thompson 512 776-2457 dene.thompson@dshs.texas.gov

ATTENTION: Anabelia Berglie Requester Name: Anabelia Berglie Requester Phone Number/Area Code: 512-776-6239 Requester E-mail Address: anabelia.berglie@dshs.texas.gov

Internal Delivery Info: FOR DSHS INTERNAL DELIVERY INFO: Building: Laboratory L-114 Floor: 2nd, Room L-216 Contact: Anabelia Berglie Phone Number: 512-776-6239

HHSC BUYER: Tracie Ogle, CTCD, CTCM 512-776-2326 Tracie.ogle@hhs.texas.gov

VENDOR: VENDOR NAME: Fisher Scientific ADDRESS: 9999 Veterans Memorial Drive CITY/ZIP: Houston, TX 77038 PHONE: 1-800-766-7000 FAX: 1-800-926-1166 EMAIL: fs.order@thermofisher.com VENDOR NUMBER LOC CODE: 1232942737 LOCATION CODE: 134 CONTACT NAME: Matt Sullivan CONTACT PHONE: 1-713-806-5231 CONTACT EMAIL ADDRESS: matt.sullivan@thermofisher.com

QUOTE #: 3332171159

Department of State Health Services

Purchase Order

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| Payment Te Net 30 | erms | Freight Terms Prepaid & Allow | Ship Via BEST WA | AY | Purchase Order | | HHSTX-4-0 | 000336056 |
|---|--|---|---|-----------------------|---|--|--|----------------------|
| If advertised specification | advertised by informal bid, Invitation for Offer, or Request for Proposal; all ecifications, terms, and conditions set forth in the advertisement and vendor's | | all or's | Date 01/04/24 | Revision | | Page | |
| 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: | 1232942737 6 FISHER SCIENTIFIC COMPANY LLC PO BOX 404705 ATLANTA GA 303844705 United States | | 2 | | 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.te | exas.gov | |
| Exempt Rea | ason: GPC |) | | | Purchaser: | Ogle,Tracie L | | |
| - | | ry Item ID - Line Description | Class/Item | Quantity | UOM | PO Price | Extended Amt | Due Date |
| Line-Sch PREMIER (FISHER GF | Invento GPO ANE PO CONT | D FISHER CONTRACT # PP-LA RACT: HHS00076400007 | | ~ ~ ~ | UOM | | Extended Amt | Due Date |
| Line-Sch PREMIER (FISHER GF PURCHAS GROUP PL REQUISITI | Invento GPO ANE PO CONT ING MET E MADE JRCHASI ON # 000 FY24 FI | D FISHER CONTRACT # PP-LA RACT: HHS00076400007 HOD: EX-0 UNDER THE AUTHORITY OF 1 NG PROGRAMS. | 508; EXPIRES | 12/31/202 | <u>UOM</u> 4 | PO Price | | |
| Line-Sch PREMIER (FISHER GF PURCHAS PURCHAS GROUP PL REQUISITI | Invento GPO ANE PO CONT ING MET E MADE JRCHASI ON # 000 FY24 FI | D FISHER CONTRACT # PP-LA 'RACT: HHS00076400007 HOD: EX-0 UNDER THE AUTHORITY OF 1 NG PROGRAMS. 00251613 SHERBRAND NESTING | -508; EXPIRES FEXAS GOVERN | 12/31/202 | UOM 4 DDE 2155.1441 FOR CS | PO Price | PURCHASING INC | LUDING |
| Line-Sch PREMIER (FISHER GF PURCHAS PURCHAS GROUP PL REQUISITI | Invento GPO ANE PO CONT ING MET E MADE JRCHASI ON # 000 FY24 FI | D FISHER CONTRACT # PP-LA 'RACT: HHS00076400007 HOD: EX-0 UNDER THE AUTHORITY OF 1 NG PROGRAMS. 00251613 SHERBRAND NESTING | -508; EXPIRES FEXAS GOVERN | 12/31/202 | UOM 4 DDE 2155.1441 FOR CS Sche | PO Price HEALTH CARE F | PURCHASING INC \$193.05 \$193.05 | LUDING |
| Line-Sch PREMIER (FISHER GF PURCHAS PURCHAS | Invento GPO ANE PO CONT ING MET E MADE JRCHASI ON # 000 FY24 FI SAMPL EST SH | D FISHER CONTRACT # PP-LA 'RACT: HHS00076400007 HOD: EX-0 UNDER THE AUTHORITY OF 1 NG PROGRAMS. 00251613 SHERBRAND NESTING | -508; EXPIRES FEXAS GOVERN | 12/31/202 | UOM 4 DDE 2155.1441 FOR CS Scho Item Total | PO Price HEALTH CARE F 193.05000 edule Total | PURCHASING INC \$193.05 \$193.05 \$193.05 | LUDING |
| Line-Sch PREMIER (FISHER GF PURCHAS GROUP PL REQUISITI 1-1 | Invento GPO ANE PO CONT ING MET E MADE JRCHASI ON # 000 FY24 FI SAMPL EST SH | D FISHER CONTRACT # PP-LA RACT: HHS00076400007 HOD: EX-0 UNDER THE AUTHORITY OF 1 NG PROGRAMS. 00251613 SHERBRAND NESTING E CUPS, 1ML, POLSTYRENE. | -508; EXPIRES TEXAS GOVERN 175-53 | 12/31/202 JMENT CC | UOM 4 DDE 2155.1441 FOR CS Sche Item Total LOT | PO Price HEALTH CARE F 193.05000 edule Total for Line 1 | PURCHASING INC \$193.05 <u>\$193.05</u> \$193.05 \$12.55 | UDING 01/10/2024 |
| Line-Sch PREMIER (FISHER GF PURCHAS GROUP PL REQUISITI 1-1 | Invento GPO ANE PO CONT ING MET E MADE JRCHASI ON # 000 FY24 FI SAMPL EST SH | D FISHER CONTRACT # PP-LA RACT: HHS00076400007 HOD: EX-0 UNDER THE AUTHORITY OF 1 NG PROGRAMS. 00251613 SHERBRAND NESTING E CUPS, 1ML, POLSTYRENE. | -508; EXPIRES TEXAS GOVERN 175-53 | 12/31/202 JMENT CC | UOM 4 DDE 2155.1441 FOR CS Sche LOT Sche | PO Price HEALTH CARE F 193.05000 edule Total | PURCHASING INC \$193.05 \$193.05 \$193.05 \$12.55 \$12.55 | LUDING 01/10/2024 |

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.

Department of State Health Services

Purchase Order

Dispatch via Print Payment Terms Freight Terms Ship Via HHSTX-4-0000336056 Net 30 Prepaid & Allow BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Revision Date Page specifications, terms, and conditions set forth in the advertisement and vendor's 01/04/24 3 conforming responses become a part of this numbered purchase order. Contractor 4546 - Austin:1100 W 49th St (DBGL Ship To: guarantees goods or services delivered meet or exceed numbered purchase order DEPARTMENT OF STATE HEALTH SERVICES requirements. 1100 W 49th St (DBGL) All shipments, shipping papers, invoices, and correspondence must be identified PO Box 149347 with our Purchase Order Number. Austin TX 78756 United States Invoice-DSHS Fiscal Claims Vendor: 1232942737 6 Bill To: FISHER SCIENTIFIC COMPANY LLC DEPARTMENT OF STATE HEALTH SERVICES PO BOX 404705 1100 W 49th St (RBB) ATLANTA GA 303844705 PO Box 149347 **United States** Austin TX 78756 United States 512/458-7442 Fax: Email: invoices@dshs.texas.gov Exempt Reason: GPO **Purchaser:** Ogle, Tracie L Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity UOM **PO Price** Extended Amt Due Date

| Authorized By | |
|------------------|------------|
| Iracic Agh, CTCD | 01/04/2024 |