Purchase Order

Dispatch via Print

Payment Te	erms Freight Terms	Ship Via			
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHS	STX-4-0000338393
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 g requirements All shipmen				Ship To: 4546 - Austin:1100 W 49th St (DBGL DEPARTMENT OF STATE HEALTH SERVICE: 1100 W 49th St (DBGL) PO Box 149347 Austin TX 78756 United States	
Vendor:	1310526418 1 YSI INC 26717 NETWORK PL CHICAGO IL 606731267 United States		Bill To:	Invoice-DSHS Fiscal Cla DEPARTMENT OF STA 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756	aims ATE HEALTH SERVICES

512/458-7442 Fax:

Email: invoices@dshs.texas.gov

United States

Exempt Reason: N/A

512/406-2464 **Purchaser:** Holton, Sharonda Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity **UOM** PO Price **Extended Amt** Due Date

CONTACT PERSON: TAMI.KENROY@DSHS.TEXAS.GOV

VENDOR: VID: 1310526418

Contractor: YSI INC - xylem Contact Name: Laura Warne Email: Laura.Warne@xylem.com

Phone: 979-219-6578

Address: 1725 Brannum Lane, Yellow Springs, OH 45387

QUOTE: B237756

SP E

HHS REQUISITION: 0000254162

HHS BUYER: SHARONDA HOLTON, CTCD 512-406-2464

SHARONDA.HOLTON@HHS.TEXAS.GOV

FOR DSHS INTERNAL DELIVERY INFO: **BUILDING: Laboratory L114** FLOOR: 6th, L-621

CONTACT: Hongan Ngo PHONE #: 512-776-2087

INFORMATION PROVIDED FOR THE BUDGET SECTION: THE 3RD THRU 5TH DIGITS OF THE PROJECT GRANT CODE: **DEPARTMENT ID CODE: H41000**

PROGRAM CODE:

INTERNAL DELIVERY CODE:

Requester name: Hongan Ngo

Requester Phone Number/area code: 512-776-2087 Requester E-mail: Hongan.Ngo@dshs.texas.gov

Purchase Order

Dispatch via Print

Payment To Net 30	erms Freight Terms Prepaid & Allow	Ship V BEST V		Purchase Order	F	HSTX-4-00	00338393
specification	by informal bid, Invitation for Offer, or Recast, terms, and conditions set forth in the adve	Date 02/09/24	Revision	Page 2			
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: 1310526418 1 YSI INC 26717 NETWORK PL CHICAGO IL 606731267 United States				Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SE 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States		I SERVICES
				Fax: Email:	512/458-7442 invoices@dshs.texas	s.gov	
Exempt Rea	ason: N/A			Purchaser:	Holton,Sharonda	51	2/406-2464
Line-Sch	Inventory Item ID - Line Description	Class/Item	Ouantity	UOM	PO Price	Extended Amt	Due Date

193-89 2.00 EA 282.30000 \$564.60 02/09/2024

330093TK; TUBE KIT-3700 NITRITE (NO2) + NITRATE (NO3), (USEPA 353.2) - FIA

Schedule Total \$564.60

FY24 176 AUTOSAMPLER PROBE

VENDOR: VID: NOT IN CAPPS YSI, Inc. 1725 Brannum Lane Yellow Springs, OH 45387 Laura Warne laura.warne@xylem.com 979-219-6578 QUOTE #: B237756

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

CODE # 3063

1-1

FOR DSHS INTERNAL DELIVERY INFO:

BUILDING: Laboratory L114 FLOOR: 6th, L-621 CONTACT: Hongan Ngo PHONE #: 512-776-2087

INFORMATION PROVIDED FOR THE BUDGET SECTION:

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

		Pu	ırchase	Order			
						Dispa	tch via Print
Payment Tern Net 30	ns Freight Terms Prepaid & Allow	Ship V BEST		Purchase Orde	er l	HHSTX-4-0	000338393
If advertised by specifications,	r informal bid, Invitation for Offer, or Requerms, and conditions set forth in the adver-	Date 02/09/24	Revision		Page 3		
guarantees goo requirements.	ponses become a part of this numbered pu ds or services delivered meet or exceed nu	mbered purchas	se order	Ship To:	4546 - Austin:110 DEPARTMENT O 1100 W 49th St (D	F STATE HÈALT	
	shipping papers, invoices, and correspondered Number.	ondence must b	e identified		PO Box 149347 Austin TX 78756 United States	202,	
Vendor:	1310526418 1 YSI INC 26717 NETWORK PL CHICAGO IL 606731267 United States			Bill To:	Invoice-DSHS Fisc DEPARTMENT O 1100 W 49th St (R PO Box 149347 Austin TX 78756 United States	F STATE HEALT	H SERVICES
				Fax: Email:	512/458-7442 invoices@dshs.tex	as.gov	
Exempt Reaso	n: N/A			Purchaser:	Holton,Sharonda	5	12/406-2464
Line-Sch I	nventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Requester Phor	e: Hongan Ngo ne Number/area code: 512-776-2087 ail: Hongan.Ngo@dshs.texas.gov						
SCOR Division	n- DSHS- PUBLIC HEALTH LABORAT	ORY					
				Item Tota	al for Line 1	\$564.60	
2-1	A000811; PILLOW ASSEMBLY	193-89	2.00	EA	165.80000	\$331.60	02/09/2024
				Sci	hedule Total	\$331.60	
				Item Tota	al for Line 2	\$331.60	
	825331; PEEK AUTOSAMPLER PROBE FOR RA/3090/3360 SAMPLER	193-89	2.00	EA	169.40000	\$338.80	02/09/2024
				Sci	hedule Total	\$338.80	

					Schedule Total	\$331.60	
					Item Total for Line 2	\$331.60	
3-1	325331; PEEK AUTOSAMPLER PROBE FOR RA/3090/3360 SAMPLER	193-89	2.00	EA	169.40000	\$338.80	02/09/2024
					Schedule Total	\$338.80	
					Item Total for Line 3	\$338.80	
4-1	285676; 100 L SAMPLE LOOP	193-89	2.00	EA	128.60000	\$257.20	02/09/2024
					Schedule Total	\$257.20	
					Item Total for Line 4	\$257.20	
5-1	326126; BRIJ-35 21% SOLUTION, 30ML	193-89	6.00	EA	30.30000	\$181.80	02/09/2024
					Schedule Total	\$181.80	
					Item Total for Line 5	\$181.80	
					Total PO Amount	\$1,674.00	

Purchase Order

Dispatch via Print

Payment Te Net 30	erms Freight Terms Prepaid & Allow	Ship V BEST		Purchase Order	ŀ	HHSTX-4-00	00338393
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				Date 02/09/24	Revision		Page 4
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				Fax: Email:	512/458-7442 invoices@dshs.texa	as.gov	
Exempt Rea	ason: N/A			Purchaser:	Holton,Sharonda	51	2/406-2464
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	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

Shamlat Hilm, CTCD

02/09/2024