## **Department of State Health Services**

## **Purchase Order**

**Dispatch via Print** 

| Payment Ter   | rms Freight Terms  | Ship Via  |                | LUIOTV 4 000000400  |  |  |  |
|---|--|---|----------------|---|--|--|--|
| Net 30  | Prepaid & Allow  | BEST WAY  | Purchase Order | HHSTX-4-0000339188  |  |  |  |
| If advertised   | by informal bid, Invitation for Offer, or R  | equest for Proposal; all                          | Date           | Revision Page   |  |  |  |
|   | s, terms, and conditions set forth in the ad   |   | 02/23/24       | 1   |  |  |  |
| 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:       | 6694 - Austin:1111 W North Loop<br>HEALTH & HUMAN SERVICES COMMISSION<br>1111 W North Loop<br>Austin TX 78756<br>United States  |  |  |  |
| Vendor:   | 1237398718 4 OXFORD UNIVERSITY PRESS INC BUSINESS OFFICE 2001 EVANS RD CARY NC 275132009 United States | NIVERSITY PRESS INC<br>OFFICE<br>S RD<br>75132009 |                | Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States |  |  |  |
|   |  |   | Fax:<br>Email: | 512/458-7442<br>invoices@dshs.texas.gov   |  |  |  |
| Exempt Reas   | son: N/A   |   |                |   |  |  |  |

Quantity

Class/Item

**Purchaser:** 

**UOM** 

Remschel, Corie

Extended Amt

**Due Date** 

PO Price

FY24 funding SP/E Requisition 256416 Pricing per Quote attached PDF Quote PO Service Dates 02/23/2024 to 08-31-2024

**Inventory Item ID - Line Description** 

Attached Terms and Conditions apply to this Purchase Order.

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 contact Oxford University Press onlinesubscriptions@oup.com

Line-Sch

Agency contact Denise Bortolussi 512-776-6492 Denise.Bortolussi@dshs.texas.gov

PCS contact Corie Remschel corie.remschel@hhs.texas.gov

## **Department of State Health Services**

## **Purchase Order**

**Dispatch via Print** 

| Payment To<br>Net 30  | erms Freight Terms Prepaid & Allow   | Ship V<br>BEST |          | Purchase Order  | ŀ   | HHSTX-4-00   | 00339188        |
|---|--|----------------|----------|---|---|--------------|-----------------|
| 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   |  |                |          | <b>Date</b> 02/23/24  | Revision Pa  6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States |              |                 |
| 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: |   |   |              |                 |
| Vendor:   | 1237398718 4 OXFORD UNIVERSITY PRESS INC BUSINESS OFFICE 2001 EVANS RD CARY NC 275132009 United States |                | Bill To: | Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVIC 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States |   | SERVICES     |                 |
|   |  |                |          | Fax:<br>Email:  | 512/458-7442<br>invoices@dshs.texa  | as.gov       |                 |
| Exempt Re   | ason: N/A  |                |          | Purchaser:  | Remschel,Corie  |              |                 |
| Line-Sch  | <b>Inventory Item ID - Line Description</b>  | Class/Item     | Quantity | UOM   | PO Price  | Extended Amt | <b>Due Date</b> |

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
( rice Renschel, CTCD

02/23/2024