

# 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-4-0000340459</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> 03/08/24
<b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>			<b>Revision</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
			<b>Page</b> 1

**Vendor:** 1421301142 3  
INTEGRATED DNA TECHNOLOGIES INC  
25104 NETWORK PL  
CHICAGO IL 606731251  
**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: 14 Days After Receipt of PO

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: Rashmi Tuladhar  
Requester Phone Number/area code: 512-776-7784  
Requester E-mail address: Rashmi,Tuladhar@dshs.texas.gov

FOR DSHS INTERNAL DELIVERY INFO:  
BUILDING: Laboratory L114  
FLOOR: 4th, L-432  
CONTACT: Rashmi Tuladhar

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

VENDOR:  
VENDOR NAME: Integrated DNA Technologies, Inc  
ADDRESS: 1710 Commercial Park  
CITY/ZIP: Coralvile, IL 52241  
PHONE/FAX: 800-328-2661 X8754  
VENDOR NUMBER AND LOC CODE: 1421301142  
LOCATION CODE: Acct #  
CONTACT NAME: Custcare@IDTDNA.com

QUOTE NUMBER: QTE-356893Q

PURCHASING METHOD: SP/E  
Not to Exceed \$10,000.00

REQUIREMENTS/LIMITATIONS:

# Department of State Health Services

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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: 00002255156

1-1	CAT#1055772 PRIMETIMETM GENE EXPRESSION MASTER MIX (1X5ML)	175-53	2.00	EA	377.00000	\$754.00	03/22/2024
<b>Schedule Total</b>						\$754.00	
<b>Item Total for Line 1</b>						\$754.00	
2-1	SHIPPING	962-86	1.00	EA	22.00000	\$22.00	03/22/2024
<b>Schedule Total</b>						\$22.00	
<b>Item Total for Line 2</b>						\$22.00	
<b>Total PO Amount</b>						\$776.00	

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.

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**Authorized By**

*Tracie Ngk, CTCI*

**03/08/2024**