

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order HHSTX-4-0000340583
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.			Date 03/11/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
			Page 1

Vendor: 1770324654 0
NORTH AMERICAN ASSOC OF CENTRAL CANCER R
DBA CENTRAL CANCER REGISTRY
2050 W ILES AVE STE A
SPRINGFIELD IL 627044194
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: Sprague, Jacob

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FY24 funding
SP/E
Requisition 258785 - Pricing per Invoice #s
0001714, 0001700, 0001713, 0001719, 0001692, and 0001710

PO Service Dates 03-11-2024 to 08-31-2024

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
North American Association of Central Cancer Registries (NAACCR)
First and Last Name: Monica Thornton
Phone number: 217-698-0800, ext. 1
Email address: mthornton@naaccr.org

Agency contact
First and Last Name: Rosalinda Wilczynski
Phone number: 512-776-6457
Email address: rosalinda.wilczynski@dshs.texas.gov

PCS contact
First and Last Name: Jacob Sprague
Phone number: 512-776-2320
Email address: Jacob.Sprague3@hhs.texas.gov

1. DSHS Accounts Payable: Send claims approval requests to eedrs.invoices@dshs.texas.gov for approval, Attn: Becky Balfour.
2. Vendor: Submit invoice with PO Number to this email address: Invoices@dshs.texas.gov.
3. SCOR Division in CAPPs - #22 DSHS Community Health Improvement
4. Conference website: <https://www.naacccr24boise.org/>
5. NAACCR invoices for all attendees is attached to requisition line 1. Please provide to vendor with PO.
6. To be eligible for early bird fee, payment must be paid by May 15, 2024. Registrations are not confirmed until payment is received in full.

2024 NAACCR Conference attendees

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1. Natalie Archer - natalie.archer@dshs.texas.gov
2. Miriam Robles - miriam.robles@dshs.texas.gov
3. Paige Miller - paige.miller@dshs.texas.gov
4. Erin Gardner - erin.gardner@dshs.texas.gov
5. Keisha Musonda - keisha.musonda@dshs.texas.gov
6. Alison Little -alison.little@dshs.texas.gov

1-1	FY 24 NAACCR Member Full Conference Registration Fees for Texas Cancer Registry Staff, Natalie Archer, Miriam Robles, Paige Miller, and Erin Gardner, to attend the 2024 NAACCR Conference, on June 24-27, 2024, in Boise, Idaho	963-37	4.00	EA	550.00000	\$2,200.00	03/20/2024
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Schedule Total \$2,200.00

Item Total for Line 1 \$2,200.00

2-1	FY 24 NAACCR Member Full Conference Registration Fees for Texas Cancer Registry Staff, Keisha Musonda and Alison Little to attend the 2024 NAACCR Conference on June 24-27, 2024, in Bosie Idaho	963-37	2.00	EA	550.00000	\$1,100.00	03/20/2024
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Schedule Total \$1,100.00

Item Total for Line 2 \$1,100.00

Total PO Amount \$3,300.00

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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

Jacob Sprague, CTC D

03/11/2024