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-5-0000341287		
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 09/01/24	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:	1904 - San Antonio:2303 SE Militar DEPARTMENT OF STATE HEALTH SERVICES 2303 SE Military Dr San Antonio TX 78223 United States		
Vendor: 175	2697891 5		Bill To:	Texas Center for Infectious Di		

GREEN PLANET INC PO BOX 743966 DALLAS TX 753743966

United States

DEPARTMENT OF STATE HEALTH SERVICES

2303 SE Military Dr San Antonio TX 78223

United States

Exempt Reason: N/A

				Purchaser:	Hill,Michelle L			
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	

SP/E PO header comments FY25 funding Requisition 0000260441 Estimate No. 5151 PO Service Dates 09/01/2024 to 08-31-2025 Good and/or services are to be delivered and invoiced after September 1, 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 08-31-2025 are automatically canceled.

Vendor contact 1752697891 Green Planet LLC Email:

Vendor Contact: Phone: 972-636-1515 Fax: 972-636-3948

Agency contact Laura Longoria

Laura.Longoria@dshs.texas.gov

PCS email PO to: Laura.Longoria@dshs.texas.gov Julian.Hernandez@dshs.texas.gov

Vendor please send all invoices to GRTCIDFiscalServices@dshs.texas.gov

PCS contact Michelle Hill 512-776-2851 Michelle.Hill2@hhs.texas.gov

1-1 926-45 1.00 LOT 4500.00000 \$4,500.00 09/01/2024

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Te	9	Ship Via		ппети	/ E 0000244207	
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	PO BOX 743966			2303 SE Military Dr		
	DALLAS TX 753743966			San Antonio TX 78223		

Exempt Reason: N/A

United States

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	Purchaser: UOM	Hill,Michelle L PO Price	Extended Amt	Due Date
					Schedule Total	\$4,500.00	
				Item	Total for Line 1	\$4,500.00	
				Т	otal PO Amount	\$4,500.00	

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.

03/19/2024

United States