

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-4-0000341293
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 03/19/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 1
			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: 1382084239 4
QUEST DIAGNOSTICS CLINICAL LABORATORIES
PO BOX 822510
PHILADELPHIA PA 191822510
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: GPO

Purchaser: Ogle,Tracie L

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
----------	--------------------------------------	------------	----------	-----	----------	--------------	----------

FREIGHT: F.O.B. Destination Freight Prepaid and Allowed

DELIVERY: 14 Day 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

QUOTE # Vendor email dated 1-19-24

AGENCY CONTACT:
Amy Deleon
Amy.deleon@dshs.texas.gov

Requester Name: Maria Nolen
Requester E-mail address: Maria.Nolen@dshs.texas.gov

FOR DSHS INTERNAL DELIVERY INFO:
BUILDING: Laboratory Dock - L114
FLOOR: 1st
CONTACT: Maria Nolen
PHONE #: 512-776-7760

HHSC BUYER:
Tracie Ogle, CTCD, CTCM
512-776-23265
Tracie.ogle@hhs.texas.gov

VENDOR:
VENDOR NAME: Quest Diagnostics
ADDRESS: 14225 Newbrook Drive
CITY/ZIP: Chantilly, VA 20151
PHONE: 1-703-802-6900, ext: 66035
CONTACT NAME: Katrina Sosinsky, Katrina.B.Sosinsky@questdiagnostics.com

PREMIER GPO and DSHS Contract # HHS00072210001

PREMIER GPO and Quest Diagnostics Clinical Laboratories Contract # PP-LA-486

PURCHASING METHOD: EX/0
Purchase made under the Authority of Texas Government Code 2155.1441 for Health Care Purchasing including group purchasing programs.

Not to Exceed \$50,000.00 unless solicited

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-4-0000341293
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 03/19/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision
			Page 2
			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: 1382084239 4
QUEST DIAGNOSTICS CLINICAL LABORATORIES
PO BOX 822510
PHILADELPHIA PA 191822510
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: GPO

Purchaser: Ogle,Tracie L

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
----------	--------------------------------------	------------	----------	-----	----------	--------------	----------

REQUIREMENTS/LIMITATIONS:

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: 0000257722

1-1	TEST CODE 37507/37503/6419 RICKETTSIA IFA SAMPLES, 12 POSITIVE R. TYPHI IGG AND 12 POSITIVE R. RICKETTSII IGG	175-53	24.00	EA	12.00000	\$288.00	04/02/2024
Schedule Total						\$288.00	
Item Total for Line 1						\$288.00	
2-1	TEST CODE 70188 CHIKUNGUNYA ANTIBODIES, IGM POSITIVE SAMPLES	175-53	10.00	EA	12.00000	\$120.00	04/02/2024
Schedule Total						\$120.00	
Item Total for Line 2						\$120.00	
3-1	TEST CODE 34306 SCHISTOSOMA IGG POSITIVE SAMPLES	175-53	7.00	EA	12.00000	\$84.00	04/02/2024
Schedule Total						\$84.00	
Item Total for Line 3						\$84.00	
4-1	TEST CODE 16012 WEST NILE VIRUS IGM POSITIVE SAMPLES	175-53	5.00	EA	12.00000	\$60.00	04/02/2024
Schedule Total						\$60.00	

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-4-0000341293
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 03/19/24
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision Page 3
			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: 1382084239 4
QUEST DIAGNOSTICS CLINICAL LABORATORIES
PO BOX 822510
PHILADELPHIA PA 191822510
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: GPO

Purchaser: Ogle, Tracie L

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
Item Total for Line 4							\$60.00
Total PO Amount							\$552.00

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.

Authorized By 	03/19/2024
--	-------------------