Purchase Order

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Ship Via **Payment Terms** Freight Terms HHSTX-4-0000343848 Net 30 Prepaid & Allow BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Date Revision Page specifications, terms, and conditions set forth in the advertisement and vendor's 04/16/24 1 conforming responses become a part of this numbered purchase order. Contractor Ship To: 4546 - Austin:1100 W 49th St (DBGL guarantees goods or services delivered meet or exceed numbered purchase order DEPARTMENT OF STATE HEALTH SERVICES requirements. 1100 W 49th St (DBGL) All shipments, shipping papers, invoices, and correspondence must be identified PO Box 149347 with our Purchase Order Number. Austin TX 78756 United States 19009998808 Bill To: Invoice-DSHS Fiscal Claims Vendor: DEPARTMENT OF STATE HEALTH SERVICES SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR 1100 W 49th St (RBB) PFLUGERVILLE TX 786605117 PO Box 149347 **United States** Austin TX 78756 United States Fax: 512/458-7442 Email: invoices@dshs.texas.gov Exempt Reason: N/A **Purchaser:** Holton,Sharonda 512/406-2464 Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity UOM **PO Price** Extended Amt Due Date

CHEMICALS AND REAGENTS MUST HAVE 12 MONTH MINIMUM EXPIRATION DATE UPON RECEIPT. NO MANUFACTURER SUBSTITUTIONS. ***SEND LATEST EXPIRING LOT AS POSSIBLE***

PO BILL TO INFORMATION DSHS ATTN: FISCAL DIVISION/ACCOUNTS PAYABLE 1100 WEST 49TH STREET AUSTIN, TEXAS 78756

CONTACT FOR QUESTIONS: TAMI.KENROY@DSHS.TEXAS.GOV

VENDOR: VID: 1900999880 8 Contractor: South Central Supply LLC Contact Name: Hope Craft / Joe Martinez Email: SALES@SUPPLYTEXAS.COM / JOE@SUPPLYTEXAS.COM Phone: 512-367-0311

QUOTE: Q21965

SP E HHS REQUISITION: 263651 HHS BUYER: SHARONDA HOLTON,CTCD - 512-406-2464 - SHARONDA.HOLTON@HHS.TEXAS.GOV

FOR DSHS INTERNAL DELIVERY INFO: BUILDING: Laboratory L114 FLOOR: 3rd Room: L301 CONTACT: Jennifer Thompson PHONE #: 512-776-7572

INFORMATION PROVIDED FOR THE BUDGET SECTION: THE 3RD THRU 5TH DIGITS OF THE PROJECT GRANT CODE: DEPARTMENT ID CODE: H41000 (Austin) PROGRAM CODE: INTERNAL DELIVERY CODE: 7959

Requester name: Jennifer Thompson Requester Phone Number/area code: 512-776-7572

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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.

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Authorized By Sharmdat Alten, CTCD 04/16/2024

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