## **Department of State Health Services**

#### **Purchase Order**

**Dispatch via Print** 

Payment Tern	8	Ship Via	Daniel and Onlan	УТРИН	-3-0000303830	
Net 30	Prepaid & Allow	BEST WAY	Purchase Order Date			
	If advertised by informal bid, Invitation for Offer, or Request for Proposal; all			Revision	Page	
specifications, terms, and conditions set forth in the advertisement and vendor's			10/29/22		1	
guarantees goo requirements.  All shipments,	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.			1901 - Tyler:2521 W Front St DEPARTMENT OF STATE HEALTH SERVICES 2521 W Front St Tyler TX 75702 United States		
Vendor:	Vendor: 1263499518 2 MONO MACHINES LLC DBA SUPPLY CHIMP 228 PARK AVE S # 36842 NEW YORK NY 10003-1502 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

			Purchaser:	Arnold, Valerie		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity UOM	PO Price	Extended Amt	<b>Due Date</b>

FY23

NIGP:425-06

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: 2 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: Angela Miller 903.533.5292 angela.miller@dshs.texas.gov

HHSC BUYER:

Valerie Arnold, CTCD, CTCM

Purchaser III

**Procurement and Contracting Services** 

office: 512-776-7312
valerie.arnold@hhs.texas.gov
1100 W. 49th Street | Mail Code 2020
Austin, TX 78756

VENDOR:

VID: 12634995182

Contractor: Mono Machines LLC dba Supply Chimp

Contact Name: Chris McPherson Email: helpme@supplychimp.com

Phone: (800) 592-1306

Address: 1133 Broadway Ste 706 New York NY 10010

PURCHASING METHOD: CP/X

Procurement methods were evaluated, and the best value is provided using the TXMAS contract.

Txmas Contract: TXMAS-19-7502

Smartbuy PO: 23028195

# **Department of State Health Services**

## **Purchase Order**

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Payment T Net 30	erms Freight Terms Prepaid & Allow	Ship V BEST		Purchase	Order	HHSTX-3-0	000303830
If advertised	d by informal bid, Invitation for Offer, ons, terms, and conditions set forth in the	r Request for Proposa	ıl; all	Date 10/29/22	Revision		Pag
guarantees grequirement All shipme	responses become a part of this number goods or services delivered meet or excess. hts, shipping papers, invoices, and controlled or Number.	eed numbered purchas	e order	Ship To:	1901 - Tyler:25: DEPARTMENT 2521 W Front St Tyler TX 75702 United States	OF STATE HEALT	H SERVICES
Vendor:	1263499518 2 MONO MACHINES LLC DBA SUPPLY CHIMP 228 PARK AVE S # 36842 NEW YORK NY 10003-1502 United States			Bill To:	Invoice-DSHS F	OF STATE HEALT (RBB)	H SERVICES
				Fax: Email:	512/458-7442 invoices@dshs.to	exas.gov	
				Purchaser:	Arnold,Valerie		
Line-Sch	Inventory Item ID - Line Description	on Class/Item	Quantity	UOM	PO Price	Extended Amt	<b>Due Date</b>
REQUIRE	MENTS/LIMITATIONS:						
This PO is	contingent upon the continued avail	ability of lawful appr	ropriations by	the Texas Leg	islature. FY2023 fundir	ıg.	
Invoice per	34 TAC §20.487, amended effective	e May 1, 2022					
Requisition	n 0000206910	*******	****		****		
If possible,	we would like to have the chair arriv						
1-1	Eurotech Chair Ea, Dft9800	425-06	1.00	EA	289.21000	\$289.21	10/29/2022
					Schedule Total	\$289.21	
	ng purchased to replace existing office of to have the chair assembled if that is po						
	Is A Perennial Favorite, Combining Va e Comfortably Contoured And Padded V		bility And Qu	•			ck That
				Item	Total for Line 1	\$289.21	
2-1	Estimated Shipping Cost	425-64	1.00	EA	50.00000	\$50.00	10/29/2022
					Schedule Total	\$50.00	
				Item	Total for Line 2	\$50.00	
				_		****	

Total PO Amount

## **Department of State Health Services**

#### **Purchase Order**

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Payment To Net 30	erms Freight Terms Prepaid & Allow	Ship V BEST		Purchase Order		HHSTX-3-00	00303830
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				<b>Date</b> 10/29/22	Revision	<b>Page</b> 3	
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Vendor:	1263499518 2 MONO MACHINES LLC DBA SUPPLY CHIMP 228 PARK AVE S # 36842 NEW YORK NY 10003-1502 United States		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SI 1100 W 49th St (RBB) PO Box 149347 Austin TX 78756 United States		I SERVICES	
				Fax: Email:	512/458-7442 invoices@dshs.te	xas.gov	
				Purchaser:	Arnold, Valerie		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date

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
UNUL ARNA, CTCD, CTCM

10/29/2022