## **Department of State Health Services**

## **Purchase Order**

**Dispatch via Print** 

Maldonado, Daniel Ray

**Extended Amt** 

**Due Date** 

PO Price

Payment Te	rms Freight Terms	Ship Via		LUIOTV O COCCOCO A		
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HHSTX-3-0000303894		
	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			10/31/22	1		
	conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order			6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States		
2	requirements.					
	All shipments, shipping papers, invoices, and correspondence must be identified					
with our Purchase Order Number.						
	12/2/02/10 2			T ' DOMO E' LOL'		
Vendor:	1263499518 2 MONO MACHINES LLC		Bill To:	Invoice-DSHS Fiscal Claims DEPARTMENT OF STATE HEALTH SERVICES		
	DBA SUPPLY CHIMP			1100 W 49th St (RBB)		
	228 PARK AVE S # 36842			PO Box 149347		
	NEW YORK NY 10003-1502			Austin TX 78756		
	United States			United States		
			Fax:	512/458-7442		
			Email:	invoices@dshs.texas.gov		

Quantity

**Purchaser:** 

**UOM** 

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

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

**Inventory Item ID - Line Description** 

DELIVERY: 14 Days After Receipt of PO

 $Delivery\ hours\ are\ from\ 8:00-11:30\ AM\ and\ 1:00-4:30\ PM\ Monday\ -\ Friday\ except\ designated\ State\ Holidays$ 

Class/Item

AGENCY CONTACT: Romey Armstrong 512-776-2267

Romey.Armstrong@dshs.texas.gov

Ship to Attn: Romey Armstrong

HHSC BUYER: Daniel Maldonado, CTCD

512-406-2649

Daniel.Maldonado01@hhs.texas.gov

VENDOR:

Line-Sch

Mono Machines LLC dba Supply Chimp

Helpme@supplychimp.com

PURCHASING METHOD: CP/X

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

Txmas Contract: TXMAS-19-7502 Term: Today until 8/31/23 Smartbuy PO: 23028341

REQUIREMENTS/LIMITATIONS:

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY2023 funding.

Invoice per 34 TAC §20.487, amended effective May 1, 2022

Requisition # 0000211063

1-1 600-02 20.00 EA 8.01000 \$160.20 11/16/2022

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			Fax: Email:	512/458-7442 invoices@dshs.t	exas.gov	
			Purchaser:	Maldonado,Daniel Ray		
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt Due Date	
	Gold Foil Document Cover Supplier Part Number: 69462 Manufacturer Part #: 7510015195771					
			Sche	dule Total	\$160.20	
			Item Total	for Line 1	\$160.20	
			Total P	O Amount	\$160.20	

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

Performance under this purchase order is acceptance of the attached affirmations and terms and conditions.

**Authorized By** Digitally signed by Daniel

Maldonado Date: 2022.10.31 Maldonado

Daniel