

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-3-0000304803
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 11/10/22
All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.			Revision 6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States
			Page 1

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: Johnson,Ja'Vorashay D 512/406-2563

Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
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FREIGHT: F.O.B. Destination Freight Prepaid and Allowed

DELIVERY: 1 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

AGENCY CONTACT:
Christina Rogers
512-776-2490
christina.rogers@dshs.texas.gov

Ship to Attn: Christina Rogers, Ph 512-776-2490

HHSC BUYER:
Ja'Vorashay Johnson, CTCD, CTCM
512-406-2563
Ja'Vorashay.Johnson03@hhs.texas.gov

VENDOR:
Chris McPherson
800-592-1306
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
12/6/2018 - 9/27/2023
Smartbuy PO: 23050052

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 # 210441

1-1	# 2910347 Mailing Tube 42 x 3 24 bx	640-30	2.00	BOX	147.18000	\$294.36	11/18/2022
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Schedule Total \$294.36

Item Total for Line 1 \$294.36

Total PO Amount \$294.36

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

Ja Vorashay Johnson, CRED, CTCM

11/14/2022