### **Health and Human Services Commission**

#### **Purchase Order**

**Dispatch via Print** Ship Via **Payment Terms** Freight Terms HHSTX-3-0000307981 Net 30 FOB Dest. Prepaid & Allowed BEST WAY **Purchase Order** If advertised by informal bid, Invitation for Offer, or Request for Proposal; all Page Date Revision specifications, terms, and conditions set forth in the advertisement and vendor's 01/10/23 1 conforming responses become a part of this numbered purchase order. Contractor Ship To: 5950 - El Paso:6700 Delta Dr guarantees goods or services delivered meet or exceed numbered purchase order HEALTH & HUMAN SERVICES COMMISSION requirements. 6700 Delta Dr All shipments, shipping papers, invoices, and correspondence must be identified 6700 Delta Dr with our Purchase Order Number. El Paso TX 79905 United States 19009998808 Bill To: Invoice-DSHS Accounts Pavable Vendor: SOUTH CENTRAL SUPPLY LLC DEPARTMENT OF STATE HEALTH SERVICES 828 BETTERMAN DR 1200 E Brin PFLUGERVILLE TX 786605117 PO Box 70 Terrell TX 75160 **United States** United States Fax: 972/551-8052 Email: DSHS.TSHBusinessOffice@dshs.texas.gov **Purchaser:** Fletcher, Patricia Rose Line-Sch **Inventory Item ID - Line Description** Class/Item Quantity UOM **PO Price** Extended Amt Due Date

Comment 1: PCS PLEASE CONTACT Marisa Gamboa 915-782-6575 FOR QUESTIONS.

\*\*VENDORS SEND INVOICES VIA EMAIL TO dshs.tshbusinessoffice@dshs.texas.gov

Vendor Name: Mono Machines dba Supply Chimp Vendor Address: 1133 Broadway Ste 706 Vendor City Zip: New York, NY 10010 Vendor Contact: Chris McPherson Vendor Phone: 800-592-1306 Vendor Contact Email: helme@supplychimp.com Vendor TIN#: 12634995182

Lead Contact Name: Gina Ramirez Lead Contact Email: georgina.ramirez@hhs.texas.gov Lead Contact Phone: 915-782-6457

Contract Manager Name: ESTELA DORADO Contract Manager Email: estela.dorado@hhs.texas.gov Contract Manager Phone: 915-782-6309

Warehouse: Please deliver to El Paso SSLC Bldg. 502 6700 Delta El Paso TX 79905

SCOR Division: 19 - State Operated Facilities PCS Email PO to: marisa.gamboa@hhs.texas.gov estela.dorado@hhs.texas.gov dshs.tshbusinessoffice@dshs.texas.gov Agency Contact: Georgina Ramirez Phone: 915/782-6457 EMAIL: georgina.ramirez@hhs.texas.gov

HHSC PCS CONTACT: Patricia Fletcher Phone: 512-406-2538 EMAIL: Patricia.Fletcher@hhsc.state.tx.us

VENDOR: South Central Supply Name Hope Craft Tel # 512/367-0311 Email: sales@supplytexas.com

# Health and Human Services Commission

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Payment Te		Ship V	Via					
Net 30	FOB Dest. Prepaid & Allowed	BEST	WAY	Pure	chase Order	Deviates	HHSTX-3-0	
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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.			Ship	р То:	5950 - El Paso:6700 Delta Dr HEALTH & HUMAN SERVICES COMMISSION 6700 Delta Dr 6700 Delta Dr El Paso TX 79905			
Vendor:	1900999880 8 SOUTH CENTRAL SUPPLY LLC 828 BETTERMAN DR PFLUGERVILLE TX 786605117 <b>United States</b>			Bill	То:	United States Invoice-DSHS A DEPARTMENT 1200 E Brin PO Box 70 Terrell TX 75160 United States	OF STATE HEALTI	H SERVICES
					Fax: Email:	972/551-8052 DSHS.TSHBusir	nessOffice@dshs.texa	s.gov
			0		chaser:	Fletcher,Patricia		D. D. (
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM		PO Price	Extended Amt	Due Date
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Delivery hou This PO is o nvoice per	urs are from 8:00-11:30 AM and 1:00-4:3 contingent upon the continued availability 34 TAC §20.487, amended effective May FY23 Goods - Precise retractable pen,	30 PM Monday y of lawful app	/ Friday exce				g. \$45.78	01/17/2023
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# **Health and Human Services Commission**

#### **Purchase Order**

Payment Terms	Freight Terms	Ship Via			Dispatch via Print
Net 30	FOB Dest. Prepaid & Allowed	BEST WAY	Purchase Order		HHSTX-3-0000307981
specifications, term	dvertised by informal bid, Invitation for Offer, or Request for Proposal; all ecifications, terms, and conditions set forth in the advertisement and vendor's		<b>Date</b> 01/10/23	Revision	Page
guarantees goods or requirements.	ess become a part of this numbered purcha r services delivered meet or exceed number oping papers, invoices, and corresponde Order Number.	ered purchase order	Smp 10:	5950 - El Paso: HEALTH & HU 6700 Delta Dr 6700 Delta Dr El Paso TX 799 United States	JMAN SERVICES COMMISSION
SC 82 PF	900999880 8 Bill SOUTH CENTRAL SUPPLY LLC 328 BETTERMAN DR FLUGERVILLE TX 786605117 Juited States	Bill To:	Invoice-DSHS Accounts Payable DEPARTMENT OF STATE HEALTH SERVICES 1200 E Brin PO Box 70 Terrell TX 75160 United States		
			Fax: Email:	972/551-8052 DSHS.TSHBusi	inessOffice@dshs.texas.gov
			Purchaser:	Fletcher,Patric	
Line-Sch Inve	ntory Item ID - Line Description C	lass/Item Qua	ntity UOM	PO Price	Extended Amt Due Date

Total PO Amount \$114.48

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	
Patricio Fletcher, CTPM	01/10/2023
	01/10/2025