Health and Human Services Commission

Purchase Order

Purchase Order

Revision

Date

Ship Via

BEST WAY

Payment Terms

Net 30

Freight Terms

Prepaid & Allow

If advertised by informal bid, Invitation for Offer, or Request for Proposal; all

Dispatch via Print

HHSTX-3-0000309109

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				Date 01/27/23	Date Revision 01/27/23		Page 1	
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.					HEALTH & HUM	Rusk TX 75785		
Vendor:	1263499518 2 MONO MACHINES LLC DBA SUPPLY CHIMP 228 PARK AVE S # 36842 NEW YORK NY 10003-1502 United States			Bill To:	Invoice - DADS HEALTH & HUM 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States	AN SERVICES CO	OMMISSION	
				Fax: Ema		hs.texas.gov		
				Purchase	er: Vasquez lii,Richa	rd		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date	
1-1	Shelf, Ability One 7520014570719 6 Shelf Tray, Steel Desk Tray comes with shelves for desk use or wall mounting, designed hold letter size documents, desktop sorted type: horizontal and stacking, 6 compartments; stell, width 12	615-33	4.00	EA	68.30000	\$273.20	03/30/2023	
					Schedule Total	\$273.20		
				Ite	em Total for Line 1	\$273.20		
2-1	Wall Mount, Grande Central Filing System, Seven Pocket, Wall Mount, Black, Plastic	615-33	5.00	PKG	68.44000	\$342.20	03/30/2023	
					Schedule Total	\$342.20		
Manufactur	er's Part Number UNV08174 ers Universal rt Number 8258			T4.	em Total for Line 2	\$342.20		
				10	em rotalioi eille 2	φ342.2U		
					Total PO Amount	\$615.40		

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Payment To Net 30	erms Freight Terms Prepaid & Allow	Ship Via BEST W		Purchase Order	HHSTX-3-0000309109		
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				Date 01/27/23	Revision Page 2 5035 - Rusk:805 N Dickinson Dr HEALTH & HUMAN SERVICES COMMISSION 805 N Dickinson Dr PO Box 318 Rusk TX 75785 United States		
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				Fax: Email:	254/562-1894 718Accounting@hhs.texas.gov		
				Purchaser:	Vasquez lii,Richard		
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

North Varyen of creo, crem

01/28/2023