Department of State Health Services

Purchase Order

Payment T Net 30	Yerms Freight Terms Prepaid & Allow	Ship V BEST		Purchase Orde		HHSTX-3-0	000310360
If advertise specificatio	d by informal bid, Invitation for Offer, or Re ons, terms, and conditions set forth in the advo	quest for Proposa ertisement and ve	al; all endor's	Date 02/17/23	Revision		Page
guarantees requiremen All shipme	responses become a part of this numbered p goods or services delivered meet or exceed n ts. nts, shipping papers, invoices, and corresp urchase Order Number.	Ship To:	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States				
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 DEPARTMEN 1100 W 49th S PO Box 14934 Austin TX 787 United States	T OF STATE HEALT t (RBB) 7	H SERVICES
				Fax: Email:	512/458-7442 invoices@dshs	.texas.gov	
				Purchaser:	Alvarado,Vero	onica	
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt	Due Date
FY23 Purc	chase / Requisition #: 0000218406						
Shipping lı	nstructions: Ship according to the DUE D	ATES specified	d on the PO.				
Freight: F.	O.B. Destination Freight Prepaid Allowe	d					
Delivery: 5	5 Days After Receipt of PO						
Delivery h	ours are from 8:00-11:30 AM and 1:00-4	:30 PM Monday	· - Friday exce	ept designated State	Holidays		
Agency Co Michele To	ontact: orres @ 512-695-9575						

Michele Torres @ 512-695-9575 michele.torres@dshs.texas.gov

Info for Warehouse staff: Delivery Contact: Lyndsey Christena @ 512-776-7404 Lyndsey.christena@dshs.texas.gov Bldg/Floor/Cubicle: Moreton 7th Suite 733, Cube 732

Purchaser: Veronica Alvarado @ (512) 406-2505 Veronia.Alvarado@hhs.texas.gov

Vendor Information: Mono Machines LLC dba Supply Chimp 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.

Contract # TXMAS-19-7502 (Funding Begins: 12-06-2018 / Funding Ends: 09-27-2023) Smartbuy PO:

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

1.00 PKG

Dispatch via Print

Department of State Health Services

Purchase Order

Dispatch via Print

Payment Ter Net 30	Prepaid & Allow	BEST	Ship Via BEST WAY		chase Order			
specifications	by informal bid, Invitation for Offer, or Re s, terms, and conditions set forth in the adv	vertisement and ve	ertisement and vendor's		e F 7/23	Revision		Pag
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.					F 1 A	6694 - Austin:1111 W North Loop HEALTH & HUMAN SERVICES COMMISSION 1111 W North Loop Austin TX 78756 United States		
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		
						i12/458-7442 nvoices@dshs.	texas.gov	
			0			Alvarado, Vero		
Line-Sch	Inventory Item ID - Line Description	Class/Item	Quantity	UOM	P	O Price	Extended Amt	Due Date
	Post-It Note Pads, 3x3, Miami Colors, 70-Pad, 24-Pads/Pack; SPN: 111622; MPN: MMM6542424SSMIACP							
					Schedu	le Total	\$40.44	
					Item Total for	Line 1	\$40.44	
2-1	Swing Arm Copyholder, Adhesive Monitor Mount, Plastic; SPN: 31051; MPN: MMMDH240MB	605-14	2.00	EA		7.62000	\$15.24	02/24/2023
					Schedu	le Total	\$15.24	
					Item Total for	Line 2	\$15.24	
3-1	Legal Ruled Pad, Perforated, 5 X 8, White, 50 Sheets,; SPN: 44443; MPN: 7530014471355	600-82	4.00	DOZ	1	1.16000	\$44.64	02/24/2023
					Schedu	le Total	\$44.64	
					Item Total for	Line 3	\$44.64	
4-1	Kensington 82025 Memory Foam Backrest, 16"W x 12"D x 16"H, Black; SPN: 5015; MPN: KMW82025	425-60	5.00	EA	6	2.97000	\$314.85	02/24/2023
	5111. 5015, 141 14. KIVI W 02025				Schedu	le Total	\$314.85	
					Item Total for			
5-1	Kantek Ktkms500 Stand Wide Monitor, Black; SPN: 28164; MPN: KTKMS500	615-33	1.00	EA	3	5.89000	\$35.89	02/24/2023
					Schedu	le Total	\$35.89	

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Payment Terms Net 30	Freight Terms Prepaid & Allow	Ship V BEST		Purchase Order		HHSTX-3-0000310360	
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M D 2' N	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: Email:	512/458-7442 invoices@dshs	.texas.gov	
				Purchaser:	Alvarado,Vero	onica	
Line-Sch Inve	entory Item ID - Line Description	Class/Item	Quantity	UOM	PO Price	Extended Amt Due Date	
Shou	ityone Angular Shape Telephone ulder Rest; SPN: 44866; MPN: 0015926295	839-12	3.00	EA	7.97000	\$23.91 02/24/2023	
				Sche	Schedule Total		
				Item Total	for Line 6	\$23.91	
				Total P	O Amount	\$474.97	

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	
Vincia Anterta	02/17/2023