

# Department of State Health Services

## Purchase Order

Dispatch via Print

|  |   |                             |  |
|--|---|-----------------------------|--|
| <b>Payment Terms</b><br>Net 30   | <b>Freight Terms</b><br>Prepaid & Allow | <b>Ship Via</b><br>BEST WAY | <b>Purchase Order</b><br><b>HHSTX-3-0000310947</b>   |
| 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. |   |                             | <b>Date</b><br>02/28/23  |
| <b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>   |   |                             | <b>Revision</b><br>Page<br>1   |
|  |   |                             | <b>Ship To:</b><br>4544 - Austin:1111 W North Loop<br>DEPARTMENT OF STATE HEALTH SERVICES<br>1111 W North Loop<br>Austin TX 78756<br>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

**Fax:** 512/458-7442  
**Email:** invoices@dshs.texas.gov

**Purchaser:** Thompson,Casandra

| Line-Sch | Inventory Item ID - Line Description | Class/Item | Quantity | UOM | PO Price | Extended Amt | Due Date |
|----------|--------------------------------------|------------|----------|-----|----------|--------------|----------|
|----------|--------------------------------------|------------|----------|-----|----------|--------------|----------|

FY23 NIGP 605-46  
SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: 1 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

AGENCY CONTACT  
Earlene Mia Simmons  
Ph: (737) 218-7067  
Email: Mia.Simmons@dshs.texas.gov

Ship to Attn: Earlene Mia Simmons  
Ph: (737) 218-7067  
Email: Mia.Simmons@dshs.texas.gov  
DEPARTMENT OF STATE HEALTH SERVICES  
1111 W North Loop  
Austin TX 78756

HHSC BUYER:  
Casandra Thompson, CTCD  
Ph: 512-776-4243  
Casandra.thompson@hhs.texas.gov

VENDOR:  
VID: 12634995182  
Contractor: Mono Machines LLC dba Supply Chimp  
Contact Name: Chris McPherson  
Email: helpme@supplychimp.com  
Phone: (800) 592-1306

PURCHASING METHOD: CP/X  
Procurement methods were evaluated, and the best value is provided using the TXMAS contract.

Txmas Contract: TXMAS-19-7502  
Term: December 06, 2018, through September 27, 2023  
Smartbuy PO: 23111808

REQUIREMENTS/LIMITATIONS:

# Department of State Health Services

## Purchase Order

Dispatch via Print

|  |   |                             |  |
|--|---|-----------------------------|--|
| <b>Payment Terms</b><br>Net 30   | <b>Freight Terms</b><br>Prepaid & Allow | <b>Ship Via</b><br>BEST WAY | <b>Purchase Order</b><br><b>HHSTX-3-0000310947</b>   |
| 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. |   |                             | <b>Date</b><br>02/28/23  |
| <b>All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number.</b>   |   |                             | <b>Revision</b><br>Page<br>2   |
|  |   |                             | <b>Ship To:</b><br>4544 - Austin:1111 W North Loop<br>DEPARTMENT OF STATE HEALTH SERVICES<br>1111 W North Loop<br>Austin TX 78756<br>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

**Fax:** 512/458-7442  
**Email:** invoices@dshs.texas.gov

**Purchaser:** Thompson,Cassandra

| Line-Sch | Inventory Item ID - Line Description | Class/Item | Quantity | UOM | PO Price | Extended Amt | Due Date |
|----------|--------------------------------------|------------|----------|-----|----------|--------------|----------|
|----------|--------------------------------------|------------|----------|-----|----------|--------------|----------|

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 0000220393

|     |   |        |      |     |          |          |            |
|-----|---|--------|------|-----|----------|----------|------------|
| 1-1 | Quality Park 46067 Qua46067 Envelope<br>Moistener w/Adhesive, 50ML, 12/Carton | 605-46 | 5.00 | CTN | 41.82000 | \$209.10 | 03/01/2023 |
|-----|---|--------|------|-----|----------|----------|------------|

**Schedule Total**                     \$209.10

**Item Total for Line 1**                     \$209.10

**Total PO Amount** \$209.10

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**

*Cassandra Thompson, CTCD*

**02/28/2023**