Purchase Order

Dispatch via Print

Payment Te Net 30	rms Freight Terms Prepaid & Allow	Ship Via BEST WAY	Purchase Order	,	HHSTX-3-0000311614
specification	by informal bid, Invitation for Offer, or s, terms, and conditions set forth in the ac	dvertisement and vendor's	Date 03/08/23	Revision	Page 1
guarantees g requirements All shipmen	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 To:	5035 - Rusk:805 MEALTH & HUM 805 N Dickinson I PO Box 318 Rusk TX 75785 United States	MAN SERVICES COMMISSION
Vendor:	1263499518 2 MONO MACHINES LLC DBA SUPPLY CHIMP 228 PARK AVE S # 36842 NEW YORK NY 10003-1502		Bill To:	Invoice - DADS HEALTH & HUM 424 Mesquite Dr PO Box 1132 Mexia TX 76667	MAN SERVICES COMMISSION

Fax: 254/562-1894

Email: 718Accounting@hhs.texas.gov

United States

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

We are requesting this vendor due to time constraint and specific room measurements. The desks and pedestal files requested need to be as specified on the documents attached to each line.

These file cabinets and pedestal files will be used to furnish the new office spaces in the newly constructed medical building and will be in uniform with all other furniture in the building.

PCS PLEASE CONTACT Emma Hernandez FOR QUESTIONS.

PLEASE HAVE VENDORS SEND INVOICES VIA EMAIL TO 718Accounting@hhsc.state.tx.us

Please add all the information below to the Purchase Order.

VID: 12634995182

Contractor: Mono Machines LLC dba Supply Chimp

United States

Contact Name: Chris McPherson Email: helpme@supplychimp.com

Phone: (800) 592-1306

Address: 1133 Broadway Ste 706 New York NY 10010

Lead Contact for SCOR: Jerry McClure

Lead Contact Email: Jerry.McClure@hhs.texas.gov

Lead Contact Phone: 903-683-7621

Requester: Emma Hernandez

Requester Email: EmmaO.Hernandez@hhs.texas.gov

Requester Phone: 903.683.7100

Warehouse: 614

Warehouse Staff: deliver to Bldg #802,

Shipping Code: 5035 Billing Code: 6483

SCOR Division: 19 - State Operated Facilities

Fund: 0001 General Revenue

Email PO to:

EmmaO.Hernandez@hhs.texas.gov Leah.alexander@hhs.texas.gov Jerry.McClure@hhs.texas.gov

Purchase Order

Dispatch via Print

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Payment Term	9	Ship Via			OTV 0 0000044644
Net 30	Prepaid & Allow	BEST WAY	Purchase Order	HH	STX-3-0000311614
	informal bid, Invitation for Offer, or R erms, and conditions set forth in the ad-		Date 03/08/23	Revision	Page
conforming resp guarantees good requirements.	sonses become a part of this numbered is or services delivered meet or exceed shipping papers, invoices, and corresuse Order Number.	purchase order. Contractor numbered purchase order	Ship To:	5035 - Rusk:805 N Dick HEALTH & HUMAN S 805 N Dickinson Dr PO Box 318 Rusk TX 75785 United States	cinson Dr ERVICES COMMISSION
Vendor:	1263499518 2		Bill To:	Invoice - DADS	

MONO MACHINES LLC DBA SUPPLY CHIMP 228 PARK AVE S # 36842 NEW YORK NY 10003-1502

United States

HEALTH & HUMAN SERVICES COMMISSION

424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States

Fax: 254/562-1894

718Accounting@hhs.texas.gov **Email:**

Purchaser: Breest, Maria Ana

Line-Sch Inventory Item ID - Line Description Class/Item Quantity UOM PO Price Extended Amt Due Date	ite
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CP/X - TXMAS Contract 615-33

SHIPPING INSTRUCTIONS: Ship according to the DUE DATES specified on the PO.

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

DELIVERY: 3 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.

** VENDORS SEND INVOICES VIA EMAIL TO ** 718Accounting@hhsc.state.tx.us**

***PACKING LIST REQUIRED TO SHOW PO NUMBER AND ATTN CONTACT INFO ***

Warehouse: 614

Warehouse Staff: deliver to Bldg #802

Lead Contact for SCOR: Jerry McClure

Lead Contact Email: Jerry.McClure@hhs.texas.gov

Lead Contact Phone: 903-683-7621

HHSC BUYER:

Ana Breest, CTCD, CTCM

512-406-2679

Ana.breest@hhs.texas.gov

VID: 12634995182

Contractor: Mono Machines LLC dba Supply Chimp

Contact Name: Chris McPherson Email: helpme@supplychimp.com

Phone: (800) 592-1306

Address: 1133 Broadway Ste 706 New York NY 10010

PURCHASING METHOD: CP/X

Procurement methods were evaluated, and the best value is provided using the TXMAS contract.

Txmas Contract: TXMAS-19-7502

Term:12.06.18/09.27.23 Smartbuy PO: 23114129

REQUIREMENTS/LIMITATIONS:

This PO is contingent upon the continued availability of lawful appropriations by the Texas Legislature. FY23 Funding.

Invoice per 34 TAC §20.487, amended effective May 1, 2023

Requisition: #219885

Smartbuy

1-1 615-33 16.00 EA 537.80000 \$8,604.80 03/08/2023

		Purchas	e Order			
					Dispa	tch via Print
Payment To Net 30	Prepaid & Allow	Ship Via BEST WAY	Purchase Order		HHSTX-3-0	000311614
	d by informal bid, Invitation for Offer, or Rens, terms, and conditions set forth in the adv		Date 03/08/23	Revision		Page 3
guarantees g	conforming responses become a part of this numbered purchase order. Contractor guarantees goods or services delivered meet or exceed numbered purchase order requirements.			5035 - Rusk:805 N Dickinson Dr HEALTH & HUMAN SERVICES COMMISSION 805 N Dickinson Dr		
	nts, shipping papers, invoices, and corres urchase Order Number.	pondence must be identified		PO Box 318 Rusk TX 7578: 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 - DAD HEALTH & H 424 Mesquite I PO Box 1132 Mexia TX 766 United States	UMAN SERVICES CO Or	OMMISSION
			Fax: Email:	254/562-1894 718Accounting	g@hhs.texas.gov	
			Purchaser:	Breest, Maria	Ana	
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
	file with cushion; Lorell Mobile Pedestal File With Seating - 15" X 19.9" X 23.8" - Black; 615/33; Mnfr #49539					
			Sch	edule Total	\$8,604.80	
see documen	nt with detailed description attached.		Item Total	for Line 1	\$8,604.80	
2-1	Pedestal File; Lorell Premium Mobile Ff Pedestal File - 15" Width X 22. 9" Depth	425-21 6.00	EA	274.22000	\$1,645.32	03/08/2023

					Schedule Total	\$8,604.80	
see documer	at with detailed description attached.				Item Total for Line 1	\$8,604.80	
2-1	Pedestal File; Lorell Premium Mobile Ff Pedestal File - 15" Width X 22. 9" Depth X 27. 8" Height - 3 X Box Drawer(S), File Drawer(S) - Steel ¿ Black; 425/21; Mnfr #79131	425-21	6.00	EA	274.22000	\$1,645.32	03/08/2023
					Schedule Total	\$1,645.32	
see documer	at with detailed description attached.				Item Total for Line 2	\$1,645.32	
3-1	Pedestal File;Lorell Black 3-Drawer Mobile Pedestal File; 615/33; Mnfr #20164	615-33	18.00	EA	215.99000	\$3,887.82	03/08/2023
					Schedule Total	\$3,887.82	
see documer	nt with detailed description attached.				Item Total for Line 3	\$3,887.82	
4-1	Vertical File Cabinet; Lorell Commercial Grade Vertical File Cabinet - 18" X 26.5" X 61" - Putty;	615-33	13.00	EA	515.99000	\$6,707.87	03/08/2023
					Schedule Total	\$6,707.87	
see documer	t with detailed description attached.				Item Total for Line 4	\$6,707.87	

615-43 3.00 EA

68.44000

\$205.32 03/08/2023

5-1

Purchase Order

Purchase Order

Revision

Date

Ship Via

BEST WAY

Freight Terms

Prepaid & Allow

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

Payment Terms

Net 30

Dispatch via Print

HHSTX-3-000031161

	ns, terms, and conditions set forth in the adve		03/08/23	Revision		raye
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 To:	5035 - Rusk:805 N Dickinson Dr HEALTH & HUMAN SERVICES COMMISSION 805 N Dickinson Dr PO Box 318 Rusk TX 75785 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 - DADS HEALTH & HUMAN SERVICES COMMISSION 424 Mesquite Dr PO Box 1132 Mexia TX 76667 United States		
			Fax: Email:	254/562-1894 718Accounting@	@hhs.texas.gov	
			Purchaser:	Breest, Maria A	na	
Line-Sch	Inventory Item ID - Line Description	Class/Item Quantity	UOM	PO Price	Extended Amt	Due Date
Line-Sch	Inventory Item ID - Line Description Grande Central Filing System, Seven Pocket, Wall Mount, Plastic, Black; 615/43; Mnfr #UNV08174	Class/Item Quantity			Extended Amt	Due Date
Line-Sch	Grande Central Filing System, Seven Pocket, Wall Mount, Plastic, Black;	Class/Item Quantity	UOM		Extended Amt	Due Date
Line-Sch	Grande Central Filing System, Seven Pocket, Wall Mount, Plastic, Black;	Class/Item Quantity	UOM Se	PO Price		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	
MBrust CTCD,CTOM	03/10/2023