

Health and Human Services Commission

Purchase Order

Dispatch via Print

| | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Payment Terms Net 30 | Freight Terms Prepaid & Allow | Ship Via BEST WAY | Purchase Order HHSTX-3-0000314025 |
| 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. | | | Date 04/06/23 |
| All shipments, shipping papers, invoices, and correspondence must be identified with our Purchase Order Number. | | | Revision 5035 - Rusk:805 N Dickinson Dr HEALTH & HUMAN SERVICES COMMISSION 805 N Dickinson Dr PO Box 318 Rusk TX 75785 United States |
| | | | Page 1 |

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: 254/562-1894
Email: 718Accounting@hhs.texas.gov

Purchaser: De La Rosa, Lindsey M

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

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

****VENDORS SEND INVOICES VIA EMAIL TO 718Accounting@hhs.texas.gov ****

AGENCY CONTACT
Lead Contact: Jerry McClure
Lead Contact Email: jerry.mcclure@hhs.texas.gov
Lead Contact Phone: 903-683-7621

Requester: Toni Booker
Requester Email: toni.booker@hhs.texas.gov
Requester Phone: 903-683-7571

Ship To: Toni Booker/903-683-7571/Bld. 615/ toni.booker@hhs.texas.gov
Warehouse: Please deliver to bldg. 614/504

Shipping Code: 5035
Billing Code: 6483
SCOR Division: 19 - State Operated Facilities

HHSC BUYER:
Lindsey De La Rosa
7766284
Lindsey.delarosa@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
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. Purchase made under the Authority of 2155.502 Development of Multiple Award Schedule.

Txmas Contract: TXMAS-19-7502

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Term: 12/6/2018-9/27/2023
Smartbuy PO: 23123593

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

Requisition 229119

| | | | | | | | |
|-----|-----------------------------------------------------------------------------------------------------------|--------|------|-----|----------|---------|------------|
| 1-1 | Goods - Smead Smd 11943 Folder 1/3Cut Ltr Ast (Supplier Part # 38104; Manufacturer Part # SMD11943) | 615-45 | 2.00 | BOX | 22.28000 | \$44.56 | 04/17/2023 |
|-----|-----------------------------------------------------------------------------------------------------------|--------|------|-----|----------|---------|------------|

| | | |
|------------------------------|--|---------|
| Schedule Total | | \$44.56 |
| Item Total for Line 1 | | \$44.56 |
| Total PO Amount | | \$44.56 |

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.

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|--------------------------|-------------------|
| Authorized By | 04/06/2023 |
|--------------------------|-------------------|