

Official Purchase Order

Order Number : 444094607

Order Date : 30 Sep 2022

All goods MUST be delivered to the address stated within the purchase order and MUST be signed for at the time of delivery, failure to get a signature will result in a credit being requested if a delivery goes missing.

We will not be liable for missing items that have not been signed for.

Any deliveries to Kings Mill Hospital Goods Receipt Point - use the entrance off the A6075 at all times. Opening Times are 08:00 to 16:00 Monday to Friday.

INVOICES must be sent to the ACCOUNTS PAYABLE DEPT.

Supplier Details:	02428 VIAMED LTD 15 STATION ROAD CROSS HILLS KEIGHLEY W. YORKS BD20 7DT						
Telephone No.:	01535 634542						
Deliver To:	GOODS RECEIPT POINT KINGS MILL HOSPITAL MANSFIELD ROAD SUTTON IN ASHFIELD NOTTS NG17 4JL						
Invoice To:	FINANCE DEPARTMENT KINGS MILL HOSPITAL MANSFIELD ROAD SUTTON IN ASHFIELD NOTTS NG17 4JL						
In case of Query please contact:	WEB BUYER 01623 622515 EXT 4242						
Requisition Point Description:	NEONATAL INTENSIVE CARE UNIT						
Paper / Web Ref:							
Requisition Number:	000171957						
Line No.	Product Details	Quantity	Price Excl VAT	Value Excl VAT	Deliver By	Contract Reference	For Trust Internal Use
001	1114007.VIAMED EYEMAX 2 NEONATAL PHOTOTHERAPY MASK - MICRO BOX OF 20	1	42.00	42.00	30 Sep 2022	PUR485/0004	WP06283240300
				42.00			

Terms and Conditions

All orders are placed against NHS Terms and Conditions. To view a copy, please use the above link to visit the DoH website.