

PURCHASE ORDER

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BIRMINGHAM WOMEN'S & CHILDREN'S NHSFT



Supplier:

VIAMED LTD
15 STATION ROAD
CROSS HILLS
KEIGHLEY, BD20 7DT

01535634542
GLN:210076186

Buyer LORRAINE RQ3 CUMBERLIDGE

Telephone 0121 371 6030

Email Lorraine.Cumberlidge@uhb.nhs.uk

RQ38310 BWH NEONATAL UNIT

Deliver to:

SEE BELOW FOR DELIVERY ADDRESS

Invoice to:

BHAM WOMENS & CHILDRENS NHSFT
RQ3 PAYABLES 7405
PHOENIX HOUSE, TOPCLIFFE LANE
WAKEFIELD, WF3 1WE

0303 123 1177
GLN:

Order Number

227220999

Date

10-NOV-22

1. This order is issued in accordance with BCH terms and conditions of contract, a copy of which can be obtained upon request from the buyer named on this order.
2. The full official Purchase Order No, must be quoted on all correspondence and documents.
3. Alternative products must not be despatched unless agreed in writing beforehand.
4. All deliveries must be made to Receipts and Distribution between 08:00 and 13:00 hours Monday to Friday unless otherwise specified on the order.

For updates on any outstanding invoices please call 0303 1231177 or use the contact form now found here: <https://www.sbs.nhs.uk/supplier-fa-contact>.

Please do not contact the Buyers for payment queries

Invoices can be emailed sbs.apinvoicing@nhs.net in PDF format and should quote the above order number and addressed as per this order.

Invoice batches must be no more than 10 PDFs.

Invoices can be submitted via Tradeshift, to register please go to <https://go.tradeshift.com/register> and fill in your company details.

Quantity Required	U.O.M	Supplier Part Number:	Description	Delivery Date	Unit Price (Inc Discount)	Line Value GBP
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Carriage Charge

10.00

Continued

Instructions to Supplier: This order is subject to the standard NHS Terms and Conditions of contract. For a copy of these please contact the Buyer for this order. Any price alterations must be agreed with the buyer prior to order execution. The above order number must be quoted on all invoices, acknowledgements, delivery notes and other correspondence. A delivery note must accompany each consignment of goods. The order must not be passed to any third party for supply. Any invoices not complying with these instructions will be returned unpaid to the supplier.

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Buyer LORRAINE RQ3 CUMBERLIDGE

Telephone 0121 371 6030

Email Lorraine.Cumberlidge@uhb.nhs.uk

RQ38310 BWH NEONATAL UNIT

Deliver to:

MAIN STORES
BIRMINGHAM WOMEN'S HOSPITAL
MINDELSON WAY
BIRMINGHAM, B15 2TG

Invoice to:

BHAM WOMENS & CHILDRENS NHSFT
RQ3 PAYABLES 7405
PHOENIX HOUSE, TOPCLIFFE LANE
WAKEFIELD, WF3 1WE

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Quantity Required	U.O.M	Supplier Part Number:	Description	Delivery Date	Unit Price (Inc Discount)	Line Value GBP
2 PACK 20		1114005	EYEMAX 2 PHOTOTHERAPY MASK - REGULAR - BLUE R300P02; PART NO 1114005	23-NOV-22	48.00	96.00
2 PACK 20		1114006	EYEMAX 2 PHOTOTHERAPY MASK - PREMIE - ORGANGE RP00P02; PART NO 1114006	23-NOV-22	46.00	92.00

Total Value of Order (Exc VAT)

198.00

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