Purchase Order Number : 200433350

Please quote the Purchase Order Number on all correspondence.
Payment will not be made without a valid P.O number.

University Hospitals Coventry and Warwickshire NHS Trust

Supplier :

VIAMED
15 STATION ROAD
CROSS HILLS
KEIGHLEY
WEST YORKSHIRE

BD20 7DT
Telephone : 01535 634542

Deliver To :

University Hospital
Delivery Point 8
Receipt and Distribution
Clifford Bridge Road
Coventry
CV2 2DX

Delivery Arrangements Tel: 02476 967367

Invoice To :

FINANCE DEPARTMENT
University Hospitals of Coventry and Warwickshire
NHS Trust,
Clifford Bridge Road,
Coventry,
CV2 2DX

Email: accounts.payable@uhcw.nhs.uk
VAT Registration Number: GB654949096

Order Date :	Required by Date :	Ordering Department :	Notes to Supplier:
14-Nov-2022	17-Nov-2022	UWD703 Neonatal Unit	

Line No.	Quantity	Unit of Purch	Description	Suppliers Part No :	Contract Reference :	Unit Price £	Discount £	VAT Amount £	Line Value £
00	3.00		EYEMAX 2 REGULAR 01114005			48.00	0.00	28.80	172.80
00	3.00		EYEMAX 2 MICRO 01114007			42.00	0.00	25.20	151.20

Contact in case of query :

Buyer Name : Alyson Gambrill-Oulds
Telephone No :
Fax No : 02476 968 417
Email : supplies@uhcw.nhs.uk

NHS Terms and conditions apply, a copy of which are available on request.

VAT Excl Total :

VAT Total :

Total Order Value : **Continued...**

Purchase Order Number : 200433350

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Order Date :	Required by Date :	Ordering Department :	Notes to Supplier:
14-Nov-2022	17-Nov-2022	UWD703 Neonatal Unit	

Line No.	Quantity	Unit of Purch	Description	Suppliers Part No :	Contract Reference :	Unit Price £	Discount £	VAT Amount £	Line Value £
00	5.00		EYEMAX 2 PREMIE 01114006			46.00	0.00	46.00	276.00

Contact in case of query :

Buyer Name :	Alyson Gambrill-Oulds
Telephone No :	
Fax No :	02476 968 417
Email :	supplies@uhcw.nhs.uk

NHS Terms and conditions apply, a copy of which are available on request.

VAT Excl Total :	**500.00**
VAT Total :	**100.00**
Total Order Value :	**600.00**