

Kingdom of Cambodia Nation Religion King

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PURCHASE ORDER

PO1-2022-11-1169

PO Number

(Annex A. S	CM0226-002)										
Department		Administration	PR Number	MN	T-PR 00 422	PO date	16-Nov-22				
Unit		MNT	Ref CE1/NE1 number(If Any)	CE1-2	2022-11-0702	Delivery date					
	D	elivery Details				Supplie	er Details	11.44			
Address	Phreah Sangreach	ngkor Hospital for Children Tep Vong Road & Umchhay Stre Sangkat Svay Dangkum,		Organisation name and address CA Code	VIAMED LTD 15 Station road, Cross Hills, Keighley West Yorkshire, BD20 7DT UK						
Control	Mr. San Kosal	le: 171202, Siem Reap, Kingdor	n of Cambodia	(if any)	N/A Kate Griffith						
Contact Email	purchaser4@angkorhos	enital org		Contact	kate.griffiths@viamed.c	co uk'					
Telephone	089 806 388/ 098 900 9			Telephone	: +44 (0)1535 634542	50. dk					
PO Line number	Ref PR line number	Description of items	Specification	Unit of measurement	Manufacture	Quantity requested	Unit price	Sub total			
1	MNT-PR00422 (Item#01)	Oxygen Sensor Class R- 22MED	Teledyn R- 22MED	Pcs	N/A-UK	15	\$ 50.8000	\$ 762.0000			
2	MNT-PR00422 (Item#02)	Oxygen Sensor Analyzer Max 13	Max-13	Pcs	N/A-UK	5	\$ 101.1500	\$ 505.7500			
3	MNT-PR00422 (Item#03)	Oxygen Sensor Class T-7	Teledyn T-7	Pcs	N/A-UK	2	\$ 57.1500	\$ 114.3000			
4	MNT-PR00422 (Item#03)	Oxygen Sensor R-30	R-30	Pcs	N/A-UK	3	\$ 70.2100	\$ 210.6300			
						Total Amo	unt Ex-work UK:	\$ 1,592.6800			
	This Double on Order on	to be a second of builting Considerate		ns & Conditions	hough a diameter define a cod	the second of the	-1 4	- Athle Doorbers			
General		ay be accepted by the Supplier's ract between the Parties.	signing and returr	ning a copy of it, or	by the timely delivery of	tne goods or se	rvices. Acceptano	e of this Purchase			
Quantity	The quantity of material ordered or released hereunder must not be exceeded and AHC shall not be liable for and may reject any material delivered in excess of that so ordered or released.										
Purchase price & payment	Materials shipped against this Agreement shall be invoiced at the price set forth in the Order. This purchase order must not be filled at higher prices than quoted or charged without notice. Unless otherwise specified on the Order, payment of the purchase price shall be made on the 10th working day of the following month of valid invoice, after presentation and receipt of Seller's correct invoice for such shipment by AHC.										
Shipment, custom clearance, delivery and acceptanc e	(i) Immediately consult with AHC to determine the best and quickest way for delivering the goods and (ii) use this means of delivery, at the Supplier's cost, if reasonably so requested by AHC. Seller shall deliver the goods/service to the place designated for shipment by AHC in the Order. Seller shall follow any shipping instructions provided by AHC and shall properly and carefully package the materials for shipment.										
Indemnific ation	Should the seller be in breach of any of its obligations under this Purchase Order, AHC will not be held responsible for any and all liabilities, costs, losses or expenses, including reasonable attorneys' fees, incurred or suffered by AHC as a result thereof. The Supplier warrants that the use or supply by AHC of the goods sold under this Purchase Order does not infringe any patent, design, trade-name or trade-mark.										
Document ation	Please send the original invoice together with the goods. In addition, please forward an electronic copy of the invoice to AHC Accounts Payable Department, email: account4@angkorhospital.org.										
Signature	Ult	tures			- Au Z.						
Position		urchasing Officer		Finance Direct		1	Hospital Director/ Ex-com				
Name		AN KOSAL	1	HULD TAY		by Phenets					
Date	1	16-Nov-22		16/11/20		1					
						17	+ 11.2	2			

រីថីព្រះសង្ឃរាជ ទេព វង្ឃ និងផ្លូវ អ៊ុំ ឆាយ ភូមិមណ្ឌល១ សង្កាត់ស្វាយជង្គុំ ប្រអប់សំបុត្រលេខ ៥០ ក្រុងសៀមរាប ព្រះរាជាណាចក្រកម្ពុជា Preah Sangreach Tep Vong & Um Chhay Street, Mondul 1, Svay Dangkum, P.O. Box 50, Siem Reap, Kingdom of Cambodia Tel: (855) 63 963 409 | Fax: (855) 63 760 452 | Email: admin@angkorhospital.org | Web: www.angkorhospital.org

Viamed Ltd Viamed Ltd 15 Station Road Cross Hills Keighley, West Yorkshire BD20 7DT, United Kingdom Tel: +44 (0) 1535 634542 Fax: +44 (0) 1535 635582 Email: info@viamed.co.uk VAT Reg No: GB287389593 Company Reg No: 01291765 Eori No: GB287389593000

Viamed Ltd



Delivery Address

Angkor Hospital for Children Tep Vong & Um Chhay Street Mondue 1 Svay Dangkum PO BOX 50 Siem Reap Cambodia

Account

Invoice Address

Angkor Hospital For Children Tep Vong & Um Chhay Street Mondue 1 Svay Dangkum PO BOX 50 Siem Reap Cambodia

Order Barcode

Contact Name Contact Tel

San Kosal 855089806388

Account

Valid until

Customer Reference

Date **Priority** 00006271 24102284KG 03 Nov 2022

: 2

: 24 Nov 2022

Proforma Invoice MVM139889

EXW Ex Works Viamed, UK * Incoterms® 2020

Page 1

Your Viamed Contact for this Proforma Invoice: kate.griffiths@viamed.co.uk

Item Reference	Description	Quantity	\$ Unit	\$ Unit Vat	\$ Total
0110022	Teledyne Oxygen Sensor R-22MED	15	50.80	0.00	762.00
0110057	Teledyne Oxygen Sensor T-7	2	57.15	0.00	114.30
0 <mark>110040</mark>	Viamed Oxygen Sensor R-30V	3	70.21	0.00	210.63
0110429	Maxtec Oxygen Sensor MAX-250E	5	87.76	0.00	438.80
0110413	Maxtec Oxygen Sensor MAX-13 Alternative Product of 011044	5	101.15	0.00	505.75
EXW	Delivery: EXW - Viamed, UK (Incoterms 2020) Consigned to:	1	0.00	0.00	0.00

Total Net: \$ 2,031.48

Total Vat: \$ 0.00

> Total: \$ 2.031.48

Banking details Sort Code Account Number IBAN

Birclays Bank 20-78-42 89771244 GB82BUKB20784289771244 BUKBGB22

tbc

BIC BUKBGB22 Terms and conditions https://www.viamed.co.uk/terms

Full proforma amount to be credited to our account net of all bank charges. Claims: Please claim non delivery within 14 days of invoice. Shortages or damage within 3 days of receipt. Claims after these times cannot be entertained.

Title to goods does not pass until payment in full has been received.

Proforma Valid for 30 days only. Viamed Ltd reserves the right to add an administration fee to the Proforma if multiple changes are requested.