

UNIVERSITY HOSPITALS OF DERBY AND BURTON NHS FOUNDATION TRUST - PURCHASE ORDER

Purchase Order No.: 00195501 Hospital: Queens Hospital - UHDB Materials Management Centre Belvedere Road Burton-on-Trent, DE13 0RB Account Number:	Supplier: A01224-00 VIAMED LTD info@viamed.co.uk 15 STATION ROAD CROSS HILLS KEIGHLEY WEST YORKSHIRE BD20 7DT	Date: 21/11/22 Contact: STORK.PURC - Mr Kenneth Storey Status: OPEN Type: REGULAR - PURCHASE Vendor Tel No: 01535-634542 Vendor Fax No: Page: 1
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Del to: Materials Management Centre Queens Hospital, Belvedere Rd Burton-on-Trent, DE13 0RB	Invoice to: Accounts Payable, The House Queens Hospital, Belvedere Rd Burton-on-Trent, DE13 0RB	Terms: Invoice month 1, payment 1st week of month 3
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LINE	ITEM NO.	VEND CAT MANF CAT	DESCRIPTION	PACKAGING MANUFACTURER	QTY UP	PRICE	EXT VALUE	TAX	VAT	GL ACCOUNT DEPT / INVENTORY
1	FJK001A	0021013	PULSE OXIMETER POSEY SENSOR WRAP *****INTERNAL DELIVERY INSTRUCTION ONLY***** PLEASE DELIVER TO NEONATAL UNIT QHB	PACK/12 EA	4 PACK	10.7000	42.80	A98	N	01-009-1335-30501 PAT RELTD NEO NATAL Req No. 0103221 Line 1
2	FJK001A	0021013	PULSE OXIMETER POSEY SENSOR WRAP	PACK/12 EA	6 PACK	10.7000	64.20	A98	N	01-009-1335-30501 PAT RELTD NEO NATAL Req No. 0103323 Line 3

COMMENTS: IN THE EVENT OF A QUERY PLEASE CONTACT KEN STOREY 01332 785552 (MON & FRI) 01283 511511 EXT. 5753 (TUES-THURS) OR EMAIL: uhdb.queenspurchasinghelpdesk@nhs.net ***** * THE ABOVE ORDER NUMBER MUST BE QUOTED IN * * FULL ON ANY INVOICES RELATING TO THIS ORDER.* * FAILURE TO DO SO WILL RESULT IN THE INVOICE * * BEING RETURNED. * ***** APPROVAL RECEIVED VICKI BALDWIN IN THE EVENT OF A QUERY PLEASE CONTACT KEN STOREY 01332 785552 (MON & FRI) 01283 511511 EXT. 5753 (TUES-THURS) OR EMAIL: uhdb.queenspurchasinghelpdesk@nhs.net ***** * THE ABOVE ORDER NUMBER MUST BE QUOTED IN * * FULL ON ANY INVOICES RELATING TO THIS ORDER.* * FAILURE TO DO SO WILL RESULT IN THE INVOICE * * BEING RETURNED. * ***** APPROVAL RECEIVED	SUBTOTAL: 107.00 VAT: 21.40 TOTAL: 128.40
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Materials Management Centre
Belvedere Road
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Account Number:

Supplier: A01224-00
VIAMED LTD
info@viamed.co.uk
15 STATION ROAD
CROSS HILLS
KEIGHLEY
WEST YORKSHIRE
BD20 7DT

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LINE	ITEM NO.	VEND CAT	DESCRIPTION	PACKAGING	QTY UP	PRICE	EXT VALUE	TAX	VAT	GL ACCOUNT
		MANF CAT		MANUFACTURER						DEPT / INVENTORY
VICKI BALDWIN										
Supplier: 1. Unless specified on the Order Form as an order placed under an existing contract which will identify the applicable settlement terms, this order is subject to UHDB settlement terms - delivery in month 1, payment in week 1 of month 3. 2. Unless otherwise agreed, this order is subject to the standard NHS Terms and Conditions. 3. Delivery notes and invoices must include PO number 4. Invoices must be rendered to the address above 5. Unless otherwise agreed, all deliveries will be carriage paid 6. In supplying goods and services to the Trust, compliance with our Supplier Code of Conduct is expected, which can be found on our website under 'Procurement'.										
						AUTHORISED BY K.JONES PROCUREMENT MANAGER FOR AND ON BEHALF OF THE TRUST				