

Purchase Order



Practice Plus Group

Viamed

15 Station Road
Cross Hills
Keighley
West Yorkshire
BD20 7DT

Order No	80211791
Supplier No	14198
Order Date	03/01/2023
Delivery Date	1/3/2023
Payment Terms	Supplier - 30 Days

Please quote our purchase order number on your invoice and all related correspondence.

Delivery Address

Practice Plus Group Urgent Treatment
Centre - St Mary's Portsmouth
Milton Road
Portsmouth
Hampshire
PO3 6DW

Invoice Address

Practice Plus Group Hospitals Limited
Accounts Payable
PO Box 3160
Reading
Berkshire
RG1 9DB

Our Contact: Bethany Daniels (Tel: 02392 858479)

Supplier Tel No: 01535 634542

Delivery Info:

Supplier Fax: 01535 635582

Our Reference	Description	Pack Size	Net/Unit	Qty	Amount	VAT
	0015011-SP02 Sensor	24	270.00	8	2,160.00	432.00

All orders placed on behalf of Practice Plus Group Hospitals Limited expressly incorporate the standard conditions of purchase of the Authorising Purchaser. For the avoidance of doubt, standard terms put forward by the supplier at any time cannot be accepted and are expressly rejected. Please contact the Authorising Purchaser for a copy of the applicable standard conditions of purchase.

Total excl VAT	2,160.00
VAT	432.00
Order Total	2,592.00