

OFFICIAL PURCHASE ORDER**No: 004732127**Date: **16/05/2023**

Supplier: **00276800VIAMED LTD**
15 STATION ROAD
CROSS HILLS
KEIGHLEY
WEST YORKSHIRE
BD20 7DT
01535 634542

Order To:

VIAMED LTD
15 STATION ROAD
CROSS HILLS
KEIGHLEY
WEST YORKSHIRE
BD20 7DT

Deliver To:-

LOGISTICS STORE
BREARLEY UNDERCROFT
NORTHERN GENERAL HOSPITAL
SHEFFIELD
MONDAY - FRIDAY 07:30 - 15:15
S5 7AU

Invoice To:

PURCHASE LEDGER DEPT -
CLOCKTOWER
SHEFFIELD TEACHING HOSPITALS
NORTHERN GENERAL HOSPITAL
HERRIES ROAD
SHEFFIELD S5 7AU. Or email
sth.finance.invoice@nhs.net
S5 7AU

Line	Qty	Supplier Ref	Contract Ref	Description	Unit Price	Total
1	3.00			0320400 EACH MAXVENTURI MUFFLER CARRIAGE £8.00 PAP EMAIL FROM AQIB	22.00	79.20
Goods Total						66.00
VAT						13.20
Total						79.20

Notes**CONDITIONS OF ORDER**Signed: 

1. All Invoices must quote our Purchase Order number and be sent to the Invoice Address shown.
2. All goods must be accompanied by a Delivery Note quoting our Purchase Order Number.
3. This Purchase Order is placed with your organisation subject to the application of our terms and conditions as referred to in the Department of Health's "Applicable Contract Terms Policy": <https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services>

For and on behalf of the Trust

Enquiries concerning this order to:

LAURA NORNABLE Tel: **0114 2715736**

or email:

sth.procurementsupport@nhs.net

Internal information:

C67111 C C U - NGH

Reference:

For payment enquiries telephone:

0114 2266499