

Order Number : **E371587**

Date : 28-JUL-23

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# PURCHASE ORDER

Buckinghamshire Healthcare **NHS**

NHS Trust

All Order Price & Delivery charge queries : bht.orders@nhs.net  
All Product / Service queries contact : jane.higgins7@nhs.net  
Invoices to : bht.invoices@cloud-trade.com

**Supplier**  
VIAMED  
15 STATION ROAD  
CROSS HILLS  
KEIGHLEY W.YORKSHIRE  
  
BD20 7DT

**Delivery Point**  
SMH MATERNITY - ROTHSCHILD WARD  
GENERAL STORES - SMH  
ENTRANCE 2  
STOKE MANDEVILLE HOSPITAL  
AYLESBURY  
BUCKS  
HP21 8AL

**Invoice Address (only invoice queries to this address)**  
BUCKINGHAMSHIRE HEALTHCARE NHS TRUST  
ACCOUNTS PAYABLE DEPT, AMERSHAM HOSPITAL  
WHILDEN STREET, AMERSHAM  
BUCKS  
HP7 0JD

**Vendor No.** 104645 **BHT Requisition No.:** R409552 **BHT IDA Code/Description:** 7D7470 SMH MATERNITY - ROTHSCHILD WARD

Quantity	Unit of Purchase	Product Code	Order Specification	Delivery Required by	Unit Price excluding VAT	Value excluding VAT	VAT
4.00	BOX 20	1114005	EyeMax 2 Neonatal Phototherapy Mask - Regular	29/07/23	48.00	192.00	01
1.00	BOX 20	1114006	EyeMax 2 Neonatal Phototherapy Mask - Premie	29/07/23	46.00	46.00	01

**CONDITIONS OF SUPPLY**

- Standard NHS Terms and Conditions for goods and/or services will apply unless otherwise agreed and appropriately authorised in writing between the two parties.
- A Delivery Note must accompany each delivery of the goods.
- This order (E371587) must be quoted on all delivery notes, invoices and correspondence.
- Each invoice must refer to one order number only.
- Failure to address correctly as stated on this order will result in a delay in payment.
- Delivery between 0830 and 1600 Monday to Thursday 0830 and 1500 Friday (unless otherwise stated)

<b>Total Net Value</b>	238.00
<b>VAT</b>	47.60
<b>Total Order Value</b>	285.60