



Supplier:

VIAMED LTD

15 STATION ROAD
CROSS HILLS
KEIGHLEY
BD20 7DT

GLN:

Buyer WOMENCHILDREN RYR

Telephone

Email uhsussex.medicalsurgicalwomenchildren-

RJR SRH PAEDIATRIC SCBU MM H25621

Deliver to:

MAIN STORES
ST. RICHARDS HOSPITAL
SPITALFIELD LANE
CHICHESTER, PO19 6SE

Invoice to:

UNIVERSITY HOSPITALS SUSSEX NHS
FOUNDATION TRUST
Accounts Payable, Financial Accounts
Brighton General Hospital, Top Floor,
Elm Grove, Brighton, BN2 3EW

GLN:

Order Number

342071046

Date _____

01-MAR-24

Any queries regarding this purchase order, please email wshnt.ryr-buying@nhs.net

Opening Hours for Main Stores at St Richards Hospital 8am to 4pm Mon-Fri

Opening Hours for Main Stores at Worthing Hospital 8am to 4pm Mon-Fri

For general procurement queries, please contact 01243 788122

For invoice queries, please contact SBS on 0303 123 1177

Please note the Trust is encouraging its suppliers to adopt TRADESHIFT to submit invoices electronically. Further information on TRADESHIFT can be found here <https://www.sbs.nhs.uk/supplier-einvoicing>

Quantity Required	U.O.M.	Supplier Part Number	Description	Delivery Date	Unit Price Including Discount	Line Value GBP
3.00	BOX 12	0021013	POSEY PULSE OXIMETRY SENSOR WRAP NEONATAL FOOT - Price when ordering qty 3 - 10 (CN:CQ:VIAM/06/23)	02-MAR-24	14.35	43.05
Total Value of Order (Exc VAT)						43.05

Instructions to Supplier: This order is subject to the standard NHS Terms and Conditions of contract. For a copy of these please contact the Buyer for this order. Any price alterations must be agreed with the buyer prior to order execution. The above order number must be quoted on all invoices, acknowledgements, delivery notes and other correspondence. A delivery note must accompany each consignment of goods. The order must not be passed to any third party for supply. Any invoices not complying with these instructions will be returned unpaid to the supplier.