## **PURCHASE ORDER**

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## SOUTH WESTERN AMBULANCE SERVICE NHS FOUNDATION



Supplier:

VIAMED LTD

15 STATION ROAD CROSS HILLS KEIGHLEY WEST YORKSHIRE BD20 7DT

GLN:

Buyer SUREE RYF DODD

Telephone

Email Procurement@swast.nhs.uk

**RYF2369 COMMUNITY ENGAGEMENT** 

## Deliver to:

SWASFT COMMUNITY RESPONDERS UNIT 13 - 15 KESTREL BUSINESS PARK SOWTON INDUSTRIAL ESTATE EXETER, EX2 7LA

## Invoice to:

SOUTH WESTERN AMBULANCE SERVICE NHS FOUNDATION TRUST RYF PAYABLES 6555 PO BOX 312 LEEDS, LS11 1HP

0303 123 1177 GLN: 
 Order Number
 151252931

 Date
 07-JUN-24

Instructions to Supplier:

- This order is subject to Standard NHS Terms and Conditions of Contract or agreed signed Contract.
- 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.

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Quantity Required	U.O.M.	Supplier Part Number	Description	Delivery Date	Unit Price Including Discount	Line Value GBP
1	EACH	4420813	VERSA STREAM NASAL/ORAL SAMPLING LINE		212.00	212.00

Total Value of Order (Exc VAT)

212.00

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.