PURCHASE ORDER

INTERNAL DELIVERY LOCATION

NOCTON WARD LCH

INVOICE TO

United Lincolnshire Hospitals NHS Trust Accounts Payable (Ref: ULHT) Lincoln County Hospital Greetwell Road LN2 5QY



SUPPLIER

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

DELIVER TO

CENTRAL GOODS RCPT POINT-LINC LINCOLN COUNTY HOSPITAL GREETWELL ROAD LINCOLN LN2 5QY

DETAILS

Order Number: **U032702**Order Date: 08/07/24
Account No: 102204

Enquiries To: purchasing.ulht@ulh.nhs.uk

CODE	DESCRIPTION	QTY	UOM	ITEM	NET
1114006	EYEMAX 2 NEONATAL PHOTOTHERAPY MASK MODEL	4	BOX OF 20	55.30	221.20
CONDITIONS OF	ORDER				
All invoices must quote Official Order No. and be rendered as directed.			Total Net	221.20	
All goods must be accompanied by a Delivery Note quoting Official Order No. INVOICES NOT QUOTING THIS OFFICIAL ORDER NUMBER WILL BE RETURNED. ANY DISCREPANCIES ON THE ORDER MUST BE NOTIFIED WITHIN 3 DAYS				Total VAT	44.24
PLEASE E-MAIL ALL INVOICE	TE ONDER MOST BE NOTIFIED WITHIN S DAYS ESS AND STATEMENTS TO accounts.payable@ulh.nhs.uk Jance with the appropriate NHS Terms & Conditions of Contract at			Total Value	265.44
	https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-ofservices				