

Official Purchase Order

Order Number : 111029481

Order Date : 02 Aug 2024

All goods MUST be delivered to the address stated within the purchase order and MUST be signed for at the time of delivery, failure to get a signature will result in a credit being requested if a delivery goes missing.

We will not be liable for missing items that have not been signed for.

Any deliveries to Kings Mill Hospital Goods Receipt Point - use the entrance off the A6075 at all times. Opening Times are 08:00 to 16:00 Monday to Friday.

INVOICES must be sent to the ACCOUNTS PAYABLE DEPT.

Supplier Details:	02428 VIAMED LTD 15 STATION ROAD CROSS HILLS KEIGHLEY W. YORKS BD20 7DT						
Telephone No.:	01535 634542						
Deliver To:	THEATRE DEPARTMENT THEATRE DEPARTMENT MANSFIELD ROAD SUTTON IN ASHFIELD NOTTS NG17 4JL						
Invoice To:	FINANCE DEPARTMENT KINGS MILL HOSPITAL MANSFIELD ROAD SUTTON IN ASHFIELD NOTTS NG17 4JL						
In case of Query please contact:	THEATRE BUYER EXT 3705						
Requisition Point Description:	KMH - ANAESTHETIC THEATRES						
Paper / Web Ref:							
Requisition Number:	000190404						
Line No.	Product Details	Quantity	Price Excl VAT	Value Excl VAT	Deliver By	Contract Reference	For Trust Internal Use
001	4610010 BOX OF 25 SINGLE USE ADULT SENSOR ^ NO CARRIAGE CHARGE PRICES CONFIRMED BY KATE AT VIAMED ^	2	265.00	530.00	05 Aug 2024		PS30302247000
				530.00			

Terms and Conditions

All orders are placed against NHS Terms and Conditions. To view a copy, please use the above link to visit the DoH website.