

Supplier: 50415600

VIAMED LTD

15 STATION ROAD

CROSS HILLS

KEIGHLEY

BD20 7DT

Tel: 01535 634542

Deliver To:

RECEIPT AND DISTRIBUTION - WYTH

RECEIPT AND DISTRIBUTION

RECEIPT AND DISTRIBUTION

WYTHENSHAWE HOSPITAL

SOUTHMOORE ROAD

MANCHESTER

M23 9LT

Invoice To:

Accounts Payable - Central

Invoices

Finance and Procurement

Business Unit

Trafford General Hospital

Davyhulme

M41 5SL

Email Invoices to:

accounts.payable@mft.nhs.uk

Enquiries To:

Julie Shiel

Tel: 291 2932

Email: julie.shiel@mft.nhs.uk

IMPORTANT INFORMATION:

NHS TERMS AND CONDITIONS APPLY COPIES AVAILABLE ON REQUEST THE ABOVE OFFICIAL ORDER NO. TO BE QUOTED ON ALL INVOICES, ADVICE NOTES, DELIVERY NOTES AND ALL CORRESPONDENCE.

NO VARIATION OF THIS ORDER WITHOUT WRITTEN AUTHORITY

INVOICE AND STATEMENTS TO:- Finance & Procurement Business Unit, Trafford General Hospital, Mooside Road, Davyhulme, Manchester, M41 5SL

EMAIL: Accounts.Payable@mft.nhs.uk

WHERE DELIVERY DOCUMENTS CANNOT BE DISPLAYED ON THE EXTERIOR OF PARCELS, IT IS IMPERATIVE THAT THE TRUSTS OFFICIAL PURCHASE ORDER IS CLEARLY SHOWN

IF PROMPT PAYMENT IS TO BE FACILITATED. PLEASE ENSURE THAT ANY COURIER SERVICE IS GIVEN THIS INFORMATION

PLEASE DO NOT INVOICE BEFORE GOODS/SERVICES HAVE BEEN DELIVERED

Line	Supplier Item Ref	Description	Quantity	Unit Price	Line Total	Delivery Date	Contract Reference
001	1114005	1114005 R300P01 EYEMAX 2 NEONATAL PHOTOTHERAPY MASK - REGULAR PACK 20 (CN:MFT/VIAMED/2023)	3	55.30	165.90	12/11/24	MFT/VIAMED/2023
002	1114006	1114006 R300P02 EYEMAX 2 NEONATAL PHOTOTHERAPY MASK - PREMIE PACK 20 (CN:MFT/VIAMED/2023)	2	55.30	110.60	12/11/24	MFT/VIAMED/2023
003	CARR/VIAMED	CARR/VIAMED UPS COURIER DELIVERY - STANDARD EACH (CN:MFT/VIAMED/2023)	1	12.00	12.00	12/11/24	MFT/VIAMED/2023
				Nett Value	288.50		
				VAT Value	57.70		
				Total Value	346.20		