

Invoices without a valid purchase order number will be returned

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SUPPLIER

Viamed Ltd
 15 Station Road
 Cross Hills
 Keighley
 West Yorkshire
 BD20 7DT

Terms and Conditions of Purchase:

1. All goods must be delivered with a delivery note quoting the purchase order number.
2. We reserve the right to return invoices that do not quote the purchase order number, which may significantly delay payment.
3. [This purchase order is in accordance with terms and conditions of purchase of the Department of Health.](#)
4. Any supplementary terms and conditions as per the stated contract reference.

DELIVER TO / EXECUTE WORK AT:

Stores Central Receipt Point
 Rotherham General Hospital
 Moorgate Road
 Rotherham
 South Yorkshire
 S60 2UD

***OPENING TIMES** 7.00am-2.00pm Mon to Fri only

48hrs notice is required for delivery of bulky items ie furniture, equipment (01709 427199)

INVOICE ADDRESS AND PAYMENT ENQUIRIES TO:**Email:** rgh-tr.accountspayable@nhs.net

Financial Services
 C/O Woodside
 Rotherham NHS Foundation Trust
 Moorgate Road
 Rotherham
 South Yorkshire
 S60 2UD

ENQUIRIES: Wayne Pearsall**TEL NO:** 01709 428384**E-MAIL:** Wayne.pearsall1@nhs.net**WARD/DEPARTMENT:** 6C8432 SCBU (MM)**ORIGINAL REQ NO:****REFERENCE:**

Line No	Product Code	Description	Qty	Pack Size	VAT %	Unit Net £ Price ex VAT	Total Line £ Price ex VAT
1	5532/1114005	1114005 - EyeMax 2 Neonatal Phototherapy Mask - Regular	1	Pack 20	20%	55.30	55.30
		Stk Ref: 1114005 Contr: Last 24 Months Purchases					
2	5532/1114006	1114006 EyeMax 2 Neonatal Phototherapy Mask - Preemie	1	Pack 20	20%	55.30	55.30
		Stk Ref: 1114006 Contr: Last 24 Months Purchases					

Authorising Officer for and on behalf of the Authority
 Head of Procurement

Total	110.60
VAT	22.12
Total Order Value	132.72