



<b>Supplier:</b> VIAMED LTD  15 STATION ROAD CROSS HILLS KEIGHLEY WEST YORKSHIRE BD20 7DT  GLN:
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<b>Deliver to:</b> EAST SURREY HOSPITAL GOODS INWARDS CANADA AVENUE REDHILL,Surrey RH1 5RH
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<b>Order Number</b>	106343332
<b>Date</b>	02-MAR-26

<b>Invoice to:</b> SURREY & SUSSEX HEALTHCARE NHS TRUST RTP PAYABLES Z955 PO BOX 312 LEEDS, LS11 1HP  0303 123 1177 GLN:
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- 1.Goods will be received only between 08.30 and 16.00 hours Monday to Thursday and between 08.30 to 15.30 on Fridays.
- 2.The Official order Number MUST be quoted on all delivery notes and invoices.
- 3.It is a condition of this order that the property & risk of the goods shall lie with the supplier until the goods have been examined and accepted at the specified delivery address as per the contract conditions.
- 4.Control Of Substances Hazardous to health (COSHH) - a full material data sheet must be forwarded for each product on the occasion of the first order - or on request of an authorised officer.
- 5.Order is conditional on Medical Devices being CE Marked in compliance with directive 93/42/EEC or other as determined by the UK MRHA

<b>Buyer</b> HARLEY RTP GIBSON
<b>Telephone</b>
<b>Email</b> harley.thoroughgood@nhs.net

RTP0121 EME DEPT ESH
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Quantity Required	U.O.M.	Supplier Part Number	Description	Delivery Date	Unit Price Including Discount	Line Value GBP
3 EACH		0110017	OXYGEN SENSOR R-17 MED	13-MAR-26	51.70	155.10

Total Value of Order (Exc VAT)

155.10

**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.