

# Purchase Order Number :300024336

Date of Order : 30-Mar-2026

Revision Date :

**Supplier : 00082800**

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

**Deliver To:**

SCH MAIN SITE  
CHILDRENS HOSPITAL MAIN SITE  
VIA STORES  
CLARKSON STREET  
SHEFFIELD  
S10 2TH

**Invoice To :**

sch.creditors@nhs.net  
FINANCE DEPARTMENT  
SHEFFIELD CHILDREN'S NHS FT  
WESTERN BANK  
SHEFFIELD  
S10 2TH

**Enquiries To :**

sth.schteam@nhs.net  
SCH MAIN SITE  
CHILDRENS HOSPITAL MAIN SITE  
VIA STORES  
CLARKSON STREET  
SHEFFIELD  
S10 2TH

CONDITIONS OF ORDER

**1. All invoices MUST quote our Purchase Order Number and be sent to the Invoice Address shown**

2. Payment enquiries to be made to sch.creditors@nhs.net

3. Order Enquiries to be made to sth.schteam@nhs.net

4. All goods must be accompanied by a Delivery Note quoting the Purchase Order Number

5. This Purchase Order is placed with your organisation subject to the application of NHS Terms and Conditions (Copies available on request or by visiting <https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services>)

Req Point: 830356

ODP SHEFFIELD CHILDRENS

Buyer: 001156

Helen Fawcett

Line No.	Product Code	GTIN	Description of Goods or Service	Quantity	Unit of Measure	Qty of Measure	Unit Price	Line Total (Excl VAT)	Deliver by Date	Contract / Quote Reference :	
001			4420922 PACK 25 VIAMED CO2 SAMPLING LINE WITH INFANT AIRWAY ADAPTOR SHORT TERM USE	1.00			164.20	164.20	03/04/2026		
002			PRICE AS PER EMAIL 27.03.26 DELIVERY CHARGE	1.00			12.00	12.00	03/04/2026		
<b>Notes:</b>				<b>Total (excl VAT) :</b>				<b>176.20</b>			