Walsall Healthcare NHS Trust

OFFICIAL ORDER

Order Date : 27-08-2026

Order No : 366011766

Must be quoted on all correspondence.

Deliver To :

WALSALL HEALTHCARE NHS TRUST
IDA ROAD
WEST MIDLANDS
WALSALL
WS2 9PS
GB

Requested delivery date: 07-09-2026

Location ID: RBK3107 PAEDIATRICS INPATIENTS - WARD 21

Invoice and Payment Enquiries To

WALSALL HEALTHCARE NHS TRUST
RBK PAYABLES G185
PO BOX 312
LEEDS
LS11 1HP
GB
Tel: 0303 123 1177

All enquiries regarding this order to:

Contact : RBK SMITH, SHARON
Telephone :
Facsimile No. :
Email Address : sharon.smith197@nhs.net

Supplier

Viamed Ltd

Customer's Supplier Name:
VIAMED LTD

Conditions

1. This order is placed subject to the relevant NHS Terms and Conditions :

1. Public Contract Regulations 2015 (PCR 2015)
https://www.england.nhs.uk/wp-content/uploads/2022/09/B1434-nhs-terms-and-conditions-for-the-supply-of-goods-and-the-provision-of-services.pdf

Or The Procurement Act 2023 (PA23)
https://www.england.nhs.uk/wp-content/uploads/2022/09/prn01988-i-the-nhs-terms-and-conditions-for-the-supply-of-goods-and-the-provision-of-services-pa
(whichever Terms and Conditions take precedent for the Procurement route to market

2. NHS England » 2026/27 NHS Standard Contract: Sub-contracts

3. Where no valid agreement exists for the items listed below the following NHS Terms and Conditions shall prevail (as applicable):-NHS Terms and Conditions for the Supply of Goods (Purchase Order Version) or NHS Terms and Conditions for the Provision of Services (Purchase Order Version). Unless the Purchase Order refers or relates to a specific contract in which case that specified contract shall apply in conjunction with these Terms and Conditions in the order of priority identified in the specified contract.

All goods must be accompanied by a delivery note quoting the above Purchase Order Number. Goods delivered without order number will not be accepted.

It is a condition of this order that the property and risk of the goods shall lie with the supplier until the goods have been accepted and inspected at the specified delivery address as per the contract condition

Invoices must quote the above Purchase Order Number. INVOICES NOT COMPLYING WITH THIS INSTRUCTION WILL BE RETURNED TO THE SUPPLIER

Goods will be received as follows RWT Between 08:00 & 16:00 Cannock Chase Hospital(CCH) 07:45 &15:45 WHT Between 08:00 & 16:00

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Line		Goods or Services Required	Quantity	UOM	Contract Ref.	Unit Price	Line Value	VAT

Monday to Friday.

Invoices for RWT must be sent via email to: sbs.apinvoicing@nhs.net & for WHT sbs.apinvoicing@nhs.net and quote the above Purchase Order Number.
RWT VAT: GB 654 947 886 EORI Code: GB 654 947 886 000 WHT VAT: GB 654-9489-81 EORI Code N/A

Line		Goods or Services Required	Quantity	UOM	Contract Ref.	Unit Price	Line Value	VAT
1		1114005 **1114005 EyeMax 2 Neonatal Phototherapy Mask - Regular (CN:DENT & OPT 25)**	**1**	BOX 20	DENT & OPT 25	£58.90	£58.90	-
2		1114006 **1114006 EyeMax 2 Neonatal Phototherapy Mask - Preemie (CN:DENT & OPT 25)**	**1**	BOX 20	DENT & OPT 25	£58.90	£58.90	-
3		1114007 **1114007 EyeMax 2 Neonatal Phototherapy Mask - Micro (CN:DENT & OPT 25)**	**1**	BOX 20	DENT & OPT 25	£58.90	£58.90	-

Net Total :	**£176.70**
Carriage :	**-**
Tax :	**-**
Total :	**£176.70**