Supplier

VIAMED 15 STATION ROAD CROSS HILLS KEIGHLEY WEST YORKSHIRE

ENGLAND BD20 7DT Supplier Code: 105734 orders@viamed.co.uk

Servicing and Repair (available from http://www.hscbusiness.hscni.net/services/2269.htm).

Deliver To / Execute Work At

MAIN STORES - ULSTER HOSPITAL MAIN STORES

ULSTER HOSPITAL

UPPER NEWTOWNARDS ROAD

DUNDONALD, BELFAST

\BT16 1RH

Purchase Order Enquiries To

STEPHEN MCCARTHY

Stephen.McCarthy@hscni.net

Invoice and Payment

SHARED SERVICES PAYMENT CENTRE SOUTH EASTERN HEALTH & SOCIAL CARE TRUST

PO Box 1043

BALLYMENA (Email: SEHSCT.POP@hscni.net)

BT42 9BS



VAT No: GD 080 (UK) VAT No: GB 888 808059 (EC)

PURCHASE ORDER

Purchase Order No: DB134974

Please quote this number in all correspondence

Purchase Order Date: 23/03/20

Our preferred method for receiving invoices is by email to the following address: SEHSCT.POP@hscni.net .

Contract Supplier Ref Product Code	Description	Required By	Qty	UOM	Unit Price	Nett Price
Ref Product Code	2810037 MD300-C21C FINGER PULSE OXIMETER RE JENNIFER COWAN		30.00	EACH	20.00	600.00
Conditions of supply	rder placed under an existing Contract, orders for Goods/Services are subject				Nett VAT	600.00 120.00