Purchase Order No.: 00172121

Hospital: UHDB - Queens Hospital

Belvedere Road Burton on Trent

DE13 ORB

Account Number:

Supplier: A01224-00

VIAMED LTD

info@viamed.co.uk 15 STATION ROAD

CROSS HILLS KEIGHLEY WEST YORKSHIRE

BD20 7DT

Date: 14/04/20

Contact: PURCHASING - MM PURCHASING

Status: OPEN

Type: REGULAR - PURCHASE

Vendor Tel No: 01535-634542

Vendor Fax No:

Del to: Materials Management

Belvedere Road

APPROVAL RECEIVED VICKI BALDWIN

Burton on Trent

DE13 ORB

Invoice to: Finance Dept - A/cs Payable

Belvedere Road

Burton on Trent DE13 ORB

Terms: Invoice month 1, payment 1st week of month 3

Page:

LINE ITEM NO.	VEND CAT MANF CAT	DESCRIPTION	PACKAGING MANUFACTURER	QTY UP	PRICE	EXT VALUE	TAX	VAT	GL ACCOUNT DEPT / INVENTORY	
1 FBU007A	1114005	PHOTOTHERAPY MASK EYEMAX 2 R300POI REGULAR	PACK/20 EA	1 PACK	42.5000	42.50	A98	N	01-009-1335-30501 PAT RELTD NEO NATAL Req No. 0078996 Line	9
COMMENTS: IN THE EVENT OF A QUERY PLEASE CONTACT QHB HELPDESK ON 01322 785552 OR uhdb.QueensPurchasingHelpDesk@nhs.net ***********************************					SUBTOTAL: VAT: TOTAL:	42.50 8.50 51.00				
* FUL: * FAI: * BEI!	L ON ANY INVOICES LURE TO DO SO WIL NG RETURNED.	RELATING TO THIS ORDER.* L RESULT IN THE INVOICE * *								

Supplier:

- 1. Unless specified on the Order Form as an order placed under an existing contract which will identify the applicable settlement terms, this order is subject to UHDB settlement terms delivery in month 1, payment in week 1 of month 3.
- 2. Unless otherwise agreed, this order is subject to the standard NHS Terms and Conditions.
- 3. Delivery notes and invoices must include PO number
- 4. Invoices must be rendered to the address above
- 5. Unless otherwise agreed, all deliveries will be carriage paid
- 6. In supplying goods and services to the Trust, compliance with our Supplier Code of Conduct is expected, which can be found on our website under 'Procurement'.

AUTHORISED BY K.JONES PROCUREMENT MANAGER FOR AND ON BEHALF OF THE TRUST