Purchase Order No.: 00172282

Hospital: E.B.M.E Department

Queens Hospital Belvedere Road

Burton on Trent DE13 ORB

Supplier: A01224-00

VIAMED LTD

info@viamed.co.uk

15 STATION ROAD CROSS HILLS

KEIGHLEY WEST YORKSHIRE

BD20 7DT

Date: 21/04/20

Contact: PURCHASING - MM PURCHASING

Status: OPEN

Type: REGULAR - PURCHASE

Vendor Tel No: 01535-634542

Vendor Fax No:

Account Number:

Del to: EBME Department

Queens Hospital

* BEING RETURNED.

APPROVAL RECEIVED GLYN EDWARDS

Burton on Trent DE13 ORB

Invoice to: Finance Dept Accounts Payable

Queens Hospital

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 FYZ012A		** EBME USE ONLY ** SPARE PARTS FOR MEDICAL EQUIPMENT AS 0110430 - MAX-250ESF OXYGEN SENSOR	EA DETAILED BELOW	2 EA	59.4000	118.80	A98	N	01-052-1725-36683 EBME Req No. 0079131 Line	1
ON 013 ***** * THE * FULI	322 785552 OR uhd ************************************	Y PLEASE CONTACT QHB HELPDESK b.QueensPurchasingHelpDesk@nhs.net ******************** ER MUST BE QUOTED IN * RELATING TO THIS ORDER.* L RESULT IN THE INVOICE *			SUBTOTAL: VAT: TOTAL:	118.80 23.76 142.56				

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