

Supplier

VIAMED  
15 STATION ROAD  
CROSS HILLS  
KEIGHLEY  
WEST YORKSHIRE  

Supplier Code:103016  
sales@viamed.co.uk

Deliver To / Execute Work At

RECEIPTS & DISTRIBUTION CENTRE  
BUILDING 2 RWT - NEW CROSS HOSPITAL  
WOLVERHAMPTON ROAD  
WOLVERHAMPTON  
WV10 0QP

Enquiries To

Catherine Cookson  
  
catherine.cookson1@nhs.net  
  
IDA: W11523    IDA Description: NEONATAL UNIT NEW CROSS

Invoice and Payment

THE ROYAL WOLVERHAMPTON HOSPITALS NHS TRUST  
CORPORATE SERVICES CENTRE  
NEW CROSS HOSPITAL, WOLVERHAMPTON ROAD  
WOLVERHAMPTON  
WV10 0QP

NHS

The Royal Wolverhampton

NHS Trust

VAT No: GB 654947886

PURCHASE ORDER

Purchase Order No: FT09608

Please quote this number in all correspondence

Purchase Order Date: 22/04/20

Line No.	Contract Ref	Supplier Item Code	Description of Goods or Services	Deliver By Date	Qty	Unit Of Purchase	Unit of Purchase Price (Exc VAT)	Line Total (Exc VAT)
1			3810010 IV ARMBOARDS	25/04/20	3.00	PACK OF 12	21.25	63.75

<div>Conditions of Order</div> <div><div>1. Unless otherwise specified as an order placed under an existing contract, this purchase order is placed subject to the application of the NHS Terms and Conditions for the Provision of Goods/Services (purchase order version) August 2013, which shall form the T and Cs of contract under which any services referred to in this purchase order are to be provided to us. Copies available from the DoH website:- <a href="https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services">https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services</a></div><div>2. All goods must be accompanied by a delivery note quoting the above Purchase Order Number.</div><div>3. The above order number must be quoted on all advice notes, delivery notes, correspondence, invoices, acknowledgements etc.</div><div>4. Goods will be received as follows:- RWT between 08.00 and 16.00 Monday to Friday. Cannock Chase Hospital (CCH) between 07:45 and 15:45 Monday to Friday.</div><div>5. 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 at the specified delivery address as per the contract conditions.</div><div>6. Invoices must be sent to the address indicated below and MUST quote the above Purchase Order Number. INVOICES NOT COMPLYING WITH THIS INSTRUCTION WILL BE RETURNED TO THE SUPPLIER.</div></div>	<div><div>Total Order Value</div><div>(Exc VAT) GBP</div><div>63.75</div></div>
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