

Official Purchase Order

Order Number : 444080299

Order Date : 26 Jun 2020

All goods MUST be delivered to the address stated within the purchase order.

Any deliveries to Kings Mill Hospital Goods Receipt Point - use the entrance off the A6075 at all times. Opening Times are 08:00 to 16:00 Monday to Friday.

INVOICES must be sent to the ACCOUNTS PAYABLE DEPT.

Supplier Details:	02428 VIAMED LTD 15 STATION ROAD CROSS HILLS KEIGHLEY W. YORKS BD20 7DT						
Telephone No.:	01535 634542						
Deliver To:	GOODS RECEIPT POINT KINGS MILL HOSPITAL MANSFIELD ROAD SUTTON IN ASHFIELD NOTTS NG17 4JL						
Invoice To:	FINANCE DEPARTMENT KINGS MILL HOSPITAL MANSFIELD ROAD SUTTON IN ASHFIELD NOTTS NG17 4JL						
In case of Query please contact:	WEB BUYER 01623 622515 EXT 4242						
Requisition Point Description:	NEONATAL INTENSIVE CARE UNIT						
Paper / Web Ref:							
Requisition Number:	000142265						
Line No.	Product Details	Quantity	Price	Value	Deliver By	Contract Reference	For Trust Internal Use
001	3810000.VIAMED PULSE OXIMETRY POSY WRAP WITH ID BAND BOX OF 20	8	14.75	118.00	25 Jun 2020	PUR485/0001	WP06283240300
				118.00			

Terms and Conditions

All orders are placed against NHS Terms and Conditions. To view a copy, please use the above link to visit the DoH website.