

UNIVERSITY HOSPITALS OF DERBY AND BURTON NHS FOUNDATION TRUST - PURCHASE ORDER

Purchase Order No.: 00176155	Supplier: A01224-00 VIAMED LTD info@viamed.co.uk 15 STATION ROAD CROSS HILLS KEIGHLEY WEST YORKSHIRE BD20 7DT	Page: Date: 15/09/20 Contact: PURCHASING - MM PURCHASING Status: OPEN Type: REGULAR - PURCHASE Vendor Tel No: 01535-634542 Vendor Fax No:
Hospital: Queens Hospital Treatent Centre Belvedere Rd Burton on Trent DE13 0RB		
Account Number:		

Del to: Queens Hosp Treatment Centre Belvedere Rd Burton on Trent DE13 0RB	Invoice to: Finance - Accounts Payable Dpt Queens Hospital Belvedere Rd Burton on Trent DE13 0RB	Terms: Invoice month 1, payment 1st week of month 3
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LINE ITEM NO.	VEND CAT MANF CAT	DESCRIPTION	PACKAGING MANUFACTURER	QTY UP	PRICE	EXT VALUE	TAX	VAT	GL ACCOUNT DEPT / INVENTORY
1 FBU138A	2520003	CONNECTOR MICROSTIM DB3 PATIENT LEAD	EA	1 EA	18.0000	18.00	A98	N	01-025-1612-30501 THEATRES TREATMENT CENTRE Req No. 0083326 Line 1

COMMENTS: IN THE EVENT OF A QUERY PLEASE CONTACT QHB HELPDESK ON 01283 511511 EXT 5753 ***** * THE ABOVE ORDER NUMBER MUST BE QUOTED IN * * FULL ON ANY INVOICES RELATING TO THIS ORDER.* * FAILURE TO DO SO WILL RESULT IN THE INVOICE * * BEING RETURNED. * ***** APPROVAL RECEIVED HELEN LAWSON	SUBTOTAL: 18.00 VAT: 3.60 TOTAL: 21.60
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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
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