

## **PURCHASE ORDER: AA10436447**

Buyer	Order Date 1	6-Sep-2020	Invoice To
REGISTERED HEAD OFFICE EGLINTON HOUSE AILSA HOSPITAL AYR, SOUTH AYRSHIRE KA6 6AB			GREENAN HOUSE AILSA HOSPITAL AYR, SOUTH AYRSHIRE KA6 6AB
Supplier	Order Contact		Delivery
VIAMED 15 STATION ROAD CROSS HILLS KEIGHLEY, WEST YORKSHIRE BD20 7DT Fax: 01535635582	Name: Jacqueline Sh Phone: 01294 32359 Fax: jacqueline.shek@aaa t.nhs.uk	5	ELAINE ANDERSON A1016-INTENSIVE THERAPY UNIT KILMARNOCK ROAD UNIVERSITY HOSPITAL CROSSHOUSE KILMARNOCK, EAST AYRSHIRE KA2 0BE

**Delivery Information** 

Order Type:	Direct Ship			
Carrier:	Not Selected -Not Selected			
FOB - Delivery Terms:	Not Selected -Not Selected			

## **Payment Information**

Customer Number:	NK
Payment Terms:	Net 30

Line	Item Type	Item No	Manufacturer No	UOM	Pack Size	Qty	Unit Price	VAT Type	Extended Amt
Line	Description							Est VAT	Exterided Ami
1	Non-Catalogue	4420531		Each		2	£53.03	SI	£106.06
	SIDESTREAM AIRWAY ADAPTER ADULT/PAEDIATRIC					£21.21	£106.06		

Total Extended Amount: £106.06

Total Estimated VAT: £21.21

Estimated Gross Amount: £127.27

## **VAT Types**

Key	Description	Estimated VAT
SI	SI - STD IRRECOVERABLE	£21.21

## **CONDITIONS OF ORDER**

Unless specified, this order is subject to the Scottish Healthcare Supplies Conditions of Contract for the Purchase of Goods and Services. No responsibility will be accepted for goods and/or services delivered to any point other than that specified on this order. The above Order Number MUST be quoted on all advice notes, delivery notes, invoices, correspondence and acknowledgements. Any alteration in quantity or price must be confirmed in writing by the buying officer. All goods must be accompanied by a delivery note clearly showing the delivery address. Only Original Equipment Manufacturers parts are to be provided unless an alternative has been approved by the ordering department Designated Purchasing Officer.

Order Number: AA10436447 16-Sep-2020 Page 1 of 1