

Official Purchase Order

Order Number: 444082252

Order Date: 12 Oct 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:	000146078				
Line Product Details	Order Deliver By Contract				

Line	Product Details	Order		Deliver By Contract			
No.		Quantity	Price	Value		Reference	For Trust Internal Use
001	3810000.VIAMED PULSE OXIMETRY POSY WRAP WITH ID BAND BOX OF 20	8	14.75	118.00	12 Oct 2020	PUR485/0001	WP06283240300
002	1114005.VIAMED EYEMAX 2 NEONATAL PHOTOTHERAPY MASK - REGULAR - PACK OF 20 BOX OF 20	1	42.50	42.50	12 Oct 2020	PUR485/0003	WP06283240300
003	1114006.VIAMED EYEMAX 2 NEONATAL PHOTOTHERAPY MASK - PREMIE - PACK OF 20 BOX OF 20	1	40.75	40.75	12 Oct 2020	PUR485/0002	WP06283240300

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.