PURCHASE ORDER

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UNIVERSITY HOSPITAL SOUTHAMPTON NHS FT



VIAMED LTD Supplier:

15 STATION ROAD **CROSS HILLS KEIGHLEY**

BD20 7DT GLN:

Buyer:	Joanne Pearce
Telephone:	02380540057
Email:	Joanne.Pearce@uhs.nhs.uk

Requester Name: Lister, Joanne Requester Telephone: Requester Email: joanne.lister@uhs.nhs.uk Deliver To: TK6638 SGH EBME LEV A SAB

GENERAL STORES LEVEL B CENTRE BLOCK

SOUTHAMPTON GENERAL HOSPITAL- TREMONA ROAD

SOUTHAMPTON HAMPSHIRE SO16 6YD **UNITED KINGDOM**

Invoice To: FINANCE DEPT (RHM)

SOUTHAMPTON GENERAL HOSPITAL

TREMONA ROAD SOUTHAMPTON SO16 6YD UNITED KINGDOM

Order Number	P10130779
Date	04-DEC-2020

Terms & Conditions

- 1) Alterations to this order are not permitted without prior agreement of the trust and must be confirmed in writing.
- 2) All deliveries must be accompanied or preceded by an advice / delivery note.
- 3) Deliver to: (location) must be clearly labelled on outer packaging
- 4) The official order number must be quoted on all documents relating to this order.
- 5) This order is subject to standard NHS Terms and Conditions unless otherwise stated. Copies available on request.
- 6) Control of Substances Hazardous to health (COSHH) a full material data sheet must be

forwarded for each product on the occasion of the first order - or on request of an authorized officer.

- 7) Order is conditional on all Medical Devices being CE Marked in compliance with directive
- 93/42/EEC or other as determined by the UK MRHA.
- 8) Payment terms 30 days net unless otherwise agreed.
- 9) Invoices must be sent electronically via email to: effu.fin.invoices@workflow.mail.em3.oraclecloud.com 10) For full T&Cs please visit:

http://www.uhs.nhs.uk/procurement/Terms-and-conditions.aspx

Note to the Supplier:

Line Number	Supplier Item	Description	UHS Reference Number	GTIN	Lot/Serial Number	Delivery Date	Currency	U.O.M	Quantity Required	Unit Price Inc Discount	Line Value
1	0110040	0110040, R-30V O2 CELL				4-Dec-20	GBP	EACH	5	54.00	270.00

Total Value of Order (Exc VAT)

270.00

Instructions to Supplier: This order is subject to the standard NHS Terms and Conditions of contract. For a copy of these please contact the Buyer for this order. Any price alterations must be agreed with the buyer prior to order execution. The above order number must be quoted on all invoices, acknowledgements, delivery notes and other correspondence. A delivery note must accompany each consignment of goods. The order must not be passed to any third party for supply. UHS operates a No PO, No Pay policy and any invoices not complying with these instructions will be returned unpaid to the supplier.