## Gloucestershire Hospitals NHS Foundation Trust



## **PURCHASE ORDER No.** GSS832233

Supplier: Viamed 15 Station Road Cross Hills Keighley F. 01535 635582 BD20 7DT		Deliver to/Execute Work at:  Maternity Ward - GRH c/o Distribution Stores Gloucestershire Royal Hospital Off Horton Road Gloucester GL1 3NN			G G G G	Invoice Address: Glos Hospitals NHS Foundation Trust Gloucestershire Shared Services PO Box 9031 Gloucester Gloucester Gloucestershire GL1 2YZ Remit invoices by email to: ghn-tr.glosfssap@nhs.net			
Acknowledgements & enqu	Delivery on or before:			Со	Contract Ref:				
Charley Bishop 0300 422 2665 Charley.bishop		op@nhs.net 07/12/2020			Co	Contract Nbr:			
Item Reference/ Contract 1114005	Description (inc. Quotation/Tender Ref.) eyemax 2 Neonatal Regular14005			Date Required	Purcha	ase Required	Unit Price excl. VAT	Total Price excl. VAT	
				11/12/2020	P	K 2	40.75	81.50	
Comments  TOTAL VALUE (Excluding VAT wh						ALUE 81.9 VAT where applicable)			
					Т	OTAL VAT		16.30	
Gloucestershire NHS Organisations: As Public Authorities we are subject to the Freedom of Information Act 2000. This means that any information you have provided <u>may</u> be publicly disclosed if requested.					Т	TOTAL VALUE			
Unless explicitly stated in the body of this Purchase Order, the applicable Terms and Conditions for this order shall be as per the Department of Health and Social Care's "Applicable Contract Terms Policy" available at Gov.uk In accepting this order, the supplier is agreeing to adhere to the NHS Counter Fraud Authority Suppliers' Code of Practice: preventing fraud, bribery and corruption.  The Trust operates a no PO, no pay policy. All Invoices must include this Purchase Order number and be sent to the invoice address stated above, any omission(s) will result in delays in payment.									