

Purchase Order

VIAMED LTD
15 STATION ROAD
CROSS HILL
KEIGHLEY
WEST YORKSHIRE
BD20 7DT

Order Number: 1428339
Supplier Id: 658929
Order Date: 29/12/2020
Delivery Date: 23/12/2020
Your Reference:
Payment Terms: Standard 30 Days

Delivery To:
Supplies & Distribution Department
Royal United Hospitals Bath NHS FT
Combe Park
Bath
BA1 3NG

Invoice To:
Accounts Payable
Building E8
Combe Park
Bath
BA1 3NG

Buyer: Steve Kelly [steve.kelly5@nhs.net]

Invoice Email: ruh-tr.accountspayable@nhs.net

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Article	Description	Qty	Unit	Unit Price	Amount in GBP
1FJK019	FINGER PULSE OXIMETER REF;2810011	10	EACH	25.50	255.00

For Terms and Conditions see:

- 1) NHS Terms & Conditions
- 2) Royal United Hospital Tender & Quotation Documentation

Total Net 255.00
Total VAT 51.00
Total in GBP 306.00