

PURCHASE ORDER

Supplier:

VIAMED LTD
15 STATION ROAD
CROSS HILLS
KEIGHLEY, BD20 7DT

01535634542/6
GLN:

BuyerEMMA PA4 WAREHAM

Telephone01935 383032

Emailemma.wareham@ydh.nhs.uk

PA40022 SCBU MAT MAN

Deliver to:

SIMPLY SERVE LIMITED
YEOVIL DISTRICT HOSPITAL
HIGHER KINGSTON
YEOVIL, BA21 4AT

Invoice to:

SIMPLY SERVE LIMITED
PA4 PAYABLES F695
PHOENIX HOUSE, TOPCLIFFE LANE
WAKEFIELD, WF3 1WE

0303 123 1177
GLN:

Order Number	327051843
Date	19-JAN-21

This order is subject to the NHS Conditions of Contract for the Purchase of Goods/Services (Purchase Order Version) (copy available on request)

Quantity Required	U.O.M	Supplier Part Number:	Description	Delivery Date	Unit Price (Inc Discount)	Line Value GBP
1	PACK 20	1114005	114005 EYEMAX 2 PHOTOTHERAPY MASK REGULAR BLUE R300P01	20-JAN-21	42.50	42.50

Total Value of Order (Exc VAT)

42.50

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. Any invoices not complying with these instructions will be returned unpaid to the supplier.