

Purchase Order

Chelsea and Westminster Hospital **MIS**

West Middlesex University Hospital

ENQUIRIES TO:

Procurement Department
Email: procurement@chelwest.nhs.uk

Accounts Payable Department: Email: apinvoices@chelwest.nhs.uk

SUPPLIER

VIAMED 15 STATION ROAD CROSSHILLS KEIGHLEY W YORKS BD20 7DT

SEND INVOICE TO::

Finance Department, West Middlesex University Hospital 2nd Floor, East Wing Twickenham Road, Isleworth Middlesex, TW7 6AF

DELIVER TO / EXECUTE WORK AT

NICU/SCBU

NHS Foundation Trust

West Middlesex University Hospital Twickenham Road Isleworth

Middlesex TW7 6AF Direct Tel: 020 8321 5326 Direct Fax: 020 8321 2588

Direct Fax: 020 8321 258

DETAILS

ORDER NUMBER: **CW131129**

 DATE:
 27/01/21

 SUPPLIER No:
 VIAME

 SITE No:
 1871

 DELIVERY DATE:
 28/01/21

 REQ. No:
 R206080

CODE	DESCRIPTION	UNIT	No. OF UNITS	TRADE DISC	ITEM PRICE Exc. VAT	VALUE Exc. VAT	VAT
3810001	3810001 - POSEY I.D BRACELETS	Pack of 12	12.0		15.20	182.40	20.00
	DELIVER TO :						
	RECEIPT & DISTRIBUTION -STORES (CW)						
	CHELSEA & WESTMINSTER HOSPITAL						
	369 FULHAM ROAD						
	LONDON						
	SW10 9NH						
1. This purchase of	rder is placed against the NHS standard terms and conditions.	<u> </u>					
2. All goods to be dispatched carriage paid unless specified on the order.			O(1)	_e _	- Total Net	182.4	10
3. No additions to this order are to be supplied without confirmation from the Procurement Office.4. A delivery note quoting this official order number must accompany all goods.		. 7	- Relief				
5. Any alteration in price(s) as shown on this order must be agreed by the Procurement Office before the order is executed.		fore the order is executed.			Total VAT	36.4	18
6. All goods to be delivered in accordance with the COSHH regulations. 7. Invoices that do not quote this official order number will be returned to the supplier. For and on behalt			alf	Total Value	218.8	38	
8. Goods must be delivered between the hours of 08:00 and 15:00, Monday to Friday unless otherwise stated			of the Trust				