## **PURCHASE ORDER**

Page 1 of 1

## WARRINGTON & HALTON NHS FT



Supplier:

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

01535634542 GLN:

| Buyer     | ANDREW RWW COX       |
|-----------|----------------------|
| Telephone |                      |
| Email     | andrew.cox13@nhs.net |

RWW1035 WARD C23

Deliver to:

GOODS IN BAY WARRINGTON HOSPITAL LOVELY LANE WARRINGTON, WA5 1QG

Invoice to:

WARRINGTON & HALTON NHS FT RWW PAYABLES B205 PHOENIX HOUSE, TOPCLIFFE LANE WAKEFIELD, WF3 1WE

0303 123 1177 GLN:

| Order Number | 133518826 |  |
|--------------|-----------|--|
| Date         | 19-FEB-21 |  |

- 1. Unless otherwise specified this order is subject to standard NHS Terms & Conditions of Contract (copies available on request)
- 2. A delivery note quoting the Order Number must accompany deliveries
- 3. The Order Number must be quoted on ALL correspondence. Invoices received without a valid order number will be returned to the Supplier
- 4. Goods must be delivered between 8.30 and 16:00 hours Monday to Friday unless otherwise stated
- 5. Due to loading bay restrictions vehicles delivering large quantities, pallets or heavy goods must be able to off-load via a tail lift. Deliveries may be turned away and the company asked to re-deliver on a suitable vehicle
- 6. Unless otherwise specified all deliveries will be made within 3 weeks of order date
- 7. This is a non smoking site inclusive off ALL buildings and hospital grounds

Your acceptance of this Purchase Order confirms that your organisation has in place sufficiently robust Sustainability and Business Continuity Plans

| Quantity<br>Required | U.O.M Supplier Part Number: | Description | Delivery<br>Date | Unit Price<br>(Inc Discount) | Line Value<br>GBP |  |
|----------------------|-----------------------------|-------------|------------------|------------------------------|-------------------|--|
|----------------------|-----------------------------|-------------|------------------|------------------------------|-------------------|--|

1 PACK 20 1114006

1114006 EYEMAX 2 PHOTOTHERAPY MASK OCCIPITAL 25-FEB-21 PREMIE FRONTAL CIRCUMFERENCE 26-32CM R300P02 ORANGE

40.75

40.75

Total Value of Order (Exc VAT)

40.75

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.