Date: 16/04/2021 **Requisition No:** 000066076



Order Type: NORMAL ORDER
Order Number: 300064151
PLEASE QUOTE THE PURCHASE ORDER NUMBER ON ALL CORRESPONDENCE

AND CLICK HERE TO ACKNOWLEDGE RECEIPT

Supplier:

Invoice To:

DELIVER TO:

Other Info:

VIAMED LTD

15 STATION ROAD CROSS HILLS

KEIGHLEY

WEST YORKSHIRE

WEST YORKSHIKE

BD20 7DT

Tel No: 01535 634 542

Fax No:

dgt.accountspayable@nhs.net

Or

Accounts Payable, Finance Department

Darent Valley Hospital Darenth Wood Road

Dartford Kent DA2 8DA

General Invoice Enquiries to:

Anne Donovan - (07830) 341292

Darent Valley Hospital - Goods Inward

Darent Valley Hospital Darenth Wood Road Dartford

DA2 8DA

Kent

Tel No: 01322 428214 Fax No: 01322 428215 **Requesting Department:**

WALNUT SCBU (GD1461)

- Level 3, Junction 11 -

Order Requested By: Christina Thomas

General Info: Walnut SCBU Urgent Order

General Order Enquiries to:

Clare Hewett 01322 428100 x 5398

Line No.	Item ref	Description	Pack / Box Size	Delivery Date:	Quantity Required	Unit Price	Line Value
001		Eye Max 2 phototherapy eye masks Regular size 32-38cm Part Number 1114005 10 Boxes required		DE	10.00	42.50	425.00
002		Eye max 2 - phototherapy eye masks Premie 26-32 cm Part number 1114006 5 boxes			5.00	42.50	212.50
003		EyeMax Phototherapy eye shields Micro part number 1114007 1 box			1.00	42.50	42.50
004		Carriage for phototherapy masks -			1.00	8.00	8.00

Conditions of Order

1. Unless specified otherwise, this order is subject to the appropriate NHS Conditions of Contract which will be advised by the Trust on Application or by visiting https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services

2. All goods must be accompanied by a delivery note quoting the above Purchase Order Number.

- 3. The above order number must be quoted on all advice notes, delivery notes, correspondence, invoices, acknowledgements etc.
- 4. Goods will be received only between 08.00 and 14.00 Monday to Friday.
- 5. It is a condition of this order that the property and risk of the goods shall lie with the supplier until the goods have been accepted at the specified delivery address as per the contract conditions.
- 6. Invoices must be sent to the address indicated above/below and must quote the above Purchase Order Number. Invoices not complying with this instruction will be returned to the supplier in accordance w the Trusts 'No Purchase Order, No Pay' policy.

VAT Excl : Total VAT:

Order Total CONTINUED....

Date: 16/04/2021 **Requisition No:** 000066076

15 STATION ROAD CROSS HILLS



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Order Number: 300064151
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Supplier:

KEIGHLEY

BD20 7DT

VIAMED LTD

WEST YORKSHIRE

Invoice To:

or

Accounts Payable, Finance Department

dgt.accountspayable@nhs.net

Darent Valley Hospital Darenth Wood Road

Dartford Kent

DA2 8DA

Tel No: 01535 634 542 General Invoice Enquiries to:

Fax No: Anne Donovan - (07830) 341292

Darent Valley Hospital - Goods Inward

Darent Valley Hospital Darenth Wood Road Dartford Kent

DA2 8DA

DELIVER TO:

Tel No: 01322 428214 Fax No: 01322 428215 . _

Other Info:

Requesting Department:

WALNUT SCBU (GD1461)
- Level 3, Junction 11 -

Order Requested By: Christina Thomas

VAT Excl:

Total VAT:

Order Total

General Info: Walnut SCBU Urgent Order

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688.00

137.60

825.60