

Enquiries To
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IDA: W11523 IDA Description: NEONATAL UNIT NEW CROSS

Invoice and Payment
<p>THE ROYAL WOLVERHAMPTON HOSPITALS NHS TRUST CORPORATE SERVICES CENTRE NEW CROSS HOSPITAL, WOLVERHAMPTON ROAD WOLVERHAMPTON WV10 0QP</p>



NHS Trust

VAT No: GB 654947886 EORI Code: GB 654 9478 860 00

Purchase Order No:MM17288

Please quote this number in all correspondence

Purchase Order Date: 27/04/21

Line No.	Contract Ref	Supplier Item Code	Description of Goods or Services	Deliver By Date	Qty	Unit Of Purchase	Unit of Purchase Price (Exc VAT)	Line Total (Exc VAT)
1		1114007	1114007 - EYEMAX 2 PHOTOTHERAPY MASK MICRO	27/04/21	1.00	PACK OF 20	36.75	36.75
2		1114006	1114006 - EYEMAX 2 PHOTOTHERAPY MASK PREMIUM	27/04/21	1.00	PACK OF 20	40.75	40.75
3		1114005	1114005 - EYEMAX 2 PHOTOTHERAPY MASK REGULAR	27/04/21	1.00	PACK OF 20	42.50	42.50

1. This order is placed subject to the relevant NHS Terms and Conditions as detailed below: (<https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services>)

a) Where a valid agreement exists for the items listed above the following NHS Terms and Conditions shall prevail (as applicable): - NHS Terms and Conditions for the Supply of Goods (Contract Version) or NHS Terms and Conditions for the Provision of Services (Contract Version).

b) Where no valid agreement exists for the items listed above the following NHS Terms and Conditions shall prevail (as applicable):- NHS Terms and Conditions for the Supply of Goods (Purchase Order Version) or NHS Terms and Conditions for the Provision of Services (Purchase Order Version).

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 as follows:- RWT between 08.00 and 16.00 Monday to Friday. Cannock Chase Hospital (CCH) between 07:45 and 15:45 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 via email to rwh-tr.creditorpayments@nhs.net and quote the above Purchase Order Number. **INVOICES NOT COMPLYING WITH THIS INSTRUCTION WILL BE RETURNED TO THE SUPPLIER.**

**Total Order Value
(Exc VAT) GBP**

120.00