

## **OFFICIAL PURCHASE ORDER** No: 004751623

Date: 15/09/2021

WEST YORKSHIRE

**BD20 7DT** 

Supplier: 00276800VIAMED LTD

**15 STATION ROAD CROSS HILLS KEIGHLEY** 

**WEST YORKSHIRE** 

**BD20 7DT** 01535 634542

Order To: Invoice To: Deliver To:-

VIAMED LTD CLINICAL ENGINEERING NGH 15 STATION ROAD GROUND FLOOR, NURSES HOME NORTHERN GENERAL HOSPITAL **CROSS HILLS KEIGHLEY** HERRIES ROAD

**SHEFFIELD** S5 7AU

SHEFFIELD TEACHING HOSPITALS NORTHERN GENERAL HOSPITAL HERRIES ROAD

SHEFFIELD S5 7AU. Or email sth.finance.invoice@nhs.net

PURCHASE LEDGER DEPT -

**CLOCKTOWER** 

Line	Qty	Supplier Ref	Contract Ref	Description	Unit Price	Total
1	1.00			0110017 EACH SENSOR, OXYGEN, R17	42.00	50.40
2	4.00			0110023 EACH SENSOR, OXYGEN, 5120 & XL	36.00	172.80
3	1.00			2530012 EACH INTENSITY KNOB	3.92	4.70
4	1.00			CARRIAGE QUOTE REF QVM132761 PAP ZOEY TEAL VIA EMAIL 15/09/21	0.00	0.00

**Goods Total** 189.92 **VAT** 37.98 Total 227.90

## **Notes**

**CONDITIONS OF ORDER** Signed:



- 1. All Invoices must quote our Purchase Order number and be sent to the Invoice Address shown.
- 2. All goods must be accompanied by a Delivery Note quoting our Purchase Order
- 3. This Purchase Order is placed with your organisation subject to the application of our

as referred to in the Department of Health's "Applicable Contract Terms Policy": https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-ofcontract-for-the-purchase-of-goods-and-supply-of-services

For and on behalf of the Trust

Enquiries concerning this order to: **SAM WRAGG** Tel: **0114 2715736** 

or email: sth.procurementsupport@nhs.net 15/09/2021, 14:25  $https://mail-attachment.googleusercontent.com/attachment/u/0/?ui=2\&ik=77e4056450\&attid=0.1\&permmsgid=msg-f:171097\dots$ 

Internal information: **C67415 CLIN ENGINEERING (MAINT) NGH** 

Reference:

For payment enquiries telephone: 0114 2266499