PURCHASE ORDER

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ST. HELENS&KNOWSLEY HOSPITALS NHS TRUST

NHS

Supplier:
VIAMED LTD
15 STATION ROAD
CROSS HILLS

KEIGHLEY,WEST YORKSHIRE BD20 7DT

01535634542
GLN:

Buyer	LYNNE RBN RITSON
Telephone	
Email	lynne.ritson@sthk.nhs.uk

RBN007E WARD 3F

Deliver to:
RECEIPT & DISTRIBUTION CENTRE
WHISTON HOSPITAL
STONEY LANE ENTRANCE
PRESCOT,Merseyside L35 5DR

Invoice to:
ST. HELENS&KNOWSLEY HOSPITALS
RBN PAYABLES B225
PHOENIX HOUSE, TOPCLIFFE LANE
WAKEFIELD, WF3 1WE

0303 123 1177
GLN:

| **Order Number** | 135384849 |
| **Date** | 15-OCT-21 |

Standard Trust Payment Terms: Net Monthly

Goods will be received only between 08:30 and 16:00 hours Monday to Thursday and 08:30 and 15:00 hours on Fridays.

This order is subject to NHS Terms and conditions of contract.

For a copy of the relevant version please see this link:
https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services

If you are not sure which version applies please contact the buyer

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Quantity Required	U.O.M	Supplier Part Number:	Description	Delivery Date	Unit Price (Inc Discount)	Line Value GBP
1 PACK 20		1114005	32-38cm regular eye masks eye max 2 Price confirmed with Sarah 15.10.2021	18-OCT-21	43.70	43.70

Total Value of Order (Exc VAT)   43.70