

Official Purchase Order

Order Number : 444089608

Order Date : 26 Oct 2021

All goods MUST be delivered to the address stated within the purchase order.

Any deliveries to Kings Mill Hospital Goods Receipt Point - use the entrance off the A6075 at all times. Opening Times are 08:00 to 16:00 Monday to Friday.

INVOICES must be sent to the ACCOUNTS PAYABLE DEPT.

Supplier Details:	02428 VIAMED LTD 15 STATION ROAD CROSS HILLS KEIGHLEY W. YORKS BD20 7DT						
Telephone No.:	01535 634542						
Deliver To:	GOODS RECEIPT POINT KINGS MILL HOSPITAL MANSFIELD ROAD SUTTON IN ASHFIELD NOTTS NG17 4JL						
Invoice To:	FINANCE DEPARTMENT KINGS MILL HOSPITAL MANSFIELD ROAD SUTTON IN ASHFIELD NOTTS NG17 4JL						
In case of Query please contact:	WEB BUYER 01623 622515 EXT 4242						
Requisition Point Description:	MATERNITY						
Paper / Web Ref:							
Requisition Number:	000160624						
Line No.	Product Details	Quantity	Price Excl VAT	Value Excl VAT	Deliver By	Contract Reference	For Trust Internal Use
001	1114005.VIAMED EYEMAX 2 NEONATAL PHOTOTHERAPY MASK - REGULAR - PACK OF 20 BOX OF 20	2	43.70	87.40	27 Oct 2021	PUR485/0003	WM34216240300
				87.40			

Terms and Conditions

All orders are placed against NHS Terms and Conditions. To view a copy, please use the above link to visit the DoH website.