Purchase Order 220013374



SUPPLIER - 001106

VIAMED 15 STATION ROAD **CROSS HILLS** KEIGHLEY **WEST YORKS**

BD20 7DT

Tel: 01535634542

Fax:

DELIVER TO

HOSPITAL MAIN STORE MAIN STORES MEDWAY MARITIME HOSPITAL WINDMILL ROAD GILLINGHAM **KENT** ME7 5NY

Delivery Times

8:00 a.m. to 4:00 p.m. Monday to Friday

Order Enquiries - Procurement

Julie Brooker 01634 833700 Medwayft.Procurement.Services@nhs.net

Invoice Enquiries - Finance Accounts Payable: 01634 833842

If any details on this PO are incorrect please reject the **Purchase Order and contact Procurement Services on the** email provided.

ORDER DETAILS

PROCUREMENT SERVICES ON THE EMAIL PROVIDED

Order Number 220013374 Order Page 1 of 1 Order Date 09/11/2021

Requisition Point 791420 - NEO-NATAL UNIT (NICU)

Requisition Number 100058005

Requisitioner Gemma Heale x5125

INVOICE TO

FINANCE DEPARTMENT GUNDUI PH WARD

MEDWAY MARITIME HOSPITAL WINDMILL ROAD GILLINGHAM

KENT ME7 5NY

Where possible all Invoices and Credit notes should be

emailed to: Medwayft.Invoices@nhs.net

- 1. This order is issued in accordance with the appropriate NHS Terms & conditions of contract a copy of which can be obtained from Procurement Dept., Tel 01634 833700
- 2. Delivery notes must accompany all deliveries of goods, quoting official order number.
- 3. No variation to this order without written authority any alteration in quantity, price or specification must be agreed in writing before the goods are supplied.
- 4. Carriage charges: Unless specified below, goods and services will be provided carriage paid.

329.70

- 5. COSHH 1998 Regulations: The Supplier must provide detailed Product Composition Data / Health and Safety for items that could be hazardous to health.
- 6. NHS Payment Terms: Net Monthly

Total Value

7. All invoices must quote official order number and be rendered as directed.

Supplier Item Ref / Contract	Quantity and Unit	Description	Unit Price	Value	Discount %	Delivery Required
	3	Eyemax phototherapy mask 20 in a pack Orange REF: R300P02	40.75	122.25	0	
	2	REGULAR phototherapy max Eyemax BLUE REF: R300P01 pack of 20	42.50	85.00	0	
	1	Neomask phototherapy mask MEDIUM REF:1114016	33.00	33.00	0	
	1	Neomask phototherapy mask LARGE REF: 1114015 20 in a pack	34.50	34.50	0	
GOODS WILL NOT BE ACCEPTED UNLESS OUR ORDER NUMBER IS INDICATED ON THE DELIVERY NOTE, WHICH MUST BE INCLUDED			Nett Value	274.75		
THE OUTER PACKAGING. IF ANY DETAILS ON THIS PO ARE INCORRECT, PLEASE REJECT THE PURCHASE ORDER AND CONTAC			VAT Value	54.95		