



Purchase Order Number	PO-100018948-0
PO Type	Inventory Replenishment
Purchase Order Date	24/11/2021
Currency	GBP
Payment Terms	30 days
Page	1 of 1

Supplier Address
human med UK Limited 17 Station Road Cross Hills Keighley North Yorkshire BD20 7DT United Kingdom Supplier Number: SUP-45259

Delivery Address
Leeds Hospital Theatre 1 Main Stores Dept Nuffield Health Leeds Hospital 2 Leighton Street Leeds West Yorkshire LS1 3EB United Kingdom Phone Number: +44 (113) 3882029

Invoice Address
The Account Department Shared Services Centre PO Box 884 Foxhall Road Ipswich Suffolk IP1 9NN United Kingdom Phone Number: +44 (1473) 279131 Email: APInvoices@nuffieldhealth.com

Please supply the following goods or services, in accordance with the contract expressly agreed between us (if any) or, otherwise, in accordance with the Nuffield Health conditions of contract (copy attached)

Line No.	Item Name/Description	Supplier Product Code	Qty	UOM	VAT Code	Unit Price	Line Amount Exc VAT	Requested Delivery Date
1	Bodyjet Application Single Use Set	500001	1.00	BX	S	139.20	139.20	29/11/2021

Comments

Total Lines Amount	139.20
Total Tax Amount	27.84
Total PO Amount	167.04