

PURCHASE ORDER



Supplier:
 VIAMED LTD
 15 STATION ROAD
 CROSS HILLS
 KEIGHLEY, BD20 7DT

 01535634542

Deliver to:
 MAIN STORES
 (EAST WING) WORTHING HOSPITAL
 HOMEFIELD ROAD
 WORTHING, BN11 2DH

Order Number	342054730
Date	26-NOV-21

Buyer ALISON RYR TAYLOR
Telephone 01243 788122
Email alison.taylor9@nhs.net

 RYR WOR BRAMBER WARD H26614

Invoice to:
 UNIVERSITY HOSPITALS SUSSEX N
 Accounts Payable, Financial A
 Brighton General Hospital, To
 Elm Grove, Brighton, BN2 3EW

 GLN:

Any queries regarding this purchase order, please email wshtnt.ryr-buying@nhs.net

Opening Hours for Main Stores at St Richards Hospital 8am to 4pm Mon-Fri
 Opening Hours for Main Stores at Worthing Hospital 8am to 4pm Mon-Fri

For general procurement queries, please contact 01243 788122
 For invoice queries, please contact SBS on 0303 123 1177

Please note the Trust is encouraging its suppliers to adopt TRADESHIFT to submit invoices electronically. Further information on TRADESHIFT can be found here <https://www.sbs.nhs.uk/supplier-einvoicing>

Quantity Required	U.O.M	Supplier Part Number:	Description	Delivery Date	Unit Price (Inc Discount)	Line Value GBP
1	PACK 1	1114005	EYEMAX 2 NEONATAL PHOTOTHERAPY MASK - REGULAR (CN:CQ:VIAM/06/20)	27-NOV-21	43.70	43.70

Total Value of Order (Exc VAT) 43.70

Instructions to Supplier: This order is subject to the standard NHS Terms and Conditions of contract. For a copy of these please contact the Buyer for this order. Any price alterations must be agreed with the buyer prior to order execution. The above order number must be quoted on all invoices, acknowledgements, delivery notes and other correspondence. A delivery note must accompany each consignment of goods. The order must not be passed to any third party for supply. Any invoices not complying with these instructions will be returned unpaid to the supplier.