

Purchase Order No:	RXP0005194427	Date of Order: 04 Jan 2022	Page 1 of 1
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Supplier	Deliver To	Invoice To	Enquiries To
VIAMED 15 STATION ROAD CROSS HILLS KEIGHLEY WEST YORKSHIRE BD20 7DT Account No.	COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST RECEIPT & DISTRIBUTION UNIVERSITY HOSPITAL OF NORTH DURHAM NORTH ROAD DURHAM DH1 5TW Deliver To GLN:5055229100289	COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST FINANCIAL SERVICES THE CENTRE FOR HEALTH WHITEHOUSE BUSINESS PARK PETERLEE SR8 2RU Trust GLN:5055229100005 Invoice to GLN:5055229100012 Tel: 0191 5692823 Email: cdda-tr.invoices@nhs.net	COUNTY DURHAM AND DARLINGTON NHS FOUNDATION TRUST PROCUREMENT DEPARTMENT . . Email: cdda-tr.sinfo@nhs.net

Important Information:

1. This Purchase Order is placed with your organisation subject to the application of our terms and conditions as referred to in the Department of Health’s “Applicable Contract Terms Policy.”
<https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services>
2. A delivery note clearly stating our official Purchase Order Number attached to the outside of the package must accompany all deliveries.
3. Goods must be delivered to the deliver to address above and between the hours stated in the delivery instructions.
4. A Tail Lift service must be used for all deliveries on pallets or heavy and bulky items. Failure to do so may result in the delivery being refused.
5. Any price amendments and carriage charges must be advised and agreed before dispatch. Failure to do so will result in payment being delayed.

Product Code	GTIN	Branch Code	Contract Ref	Description of Goods or Services	Qty	Unit of Issue	Price (£)	VAT	Total (£)
0110023		CD2033		R-23V Oxygen Sensor	1	EACH	42.00	8.40	50.40
Total Order Value (GBP) including Carriage							42.00	8.40	50.40
Document Carriage Breakdown							0.00	0.00	0.00

Special Instructions: