

PURCHASE ORDER

Page 1 of 1

UNIVERSITY HOSPITALS SUSSEX NHS FOUNDATION



Supplier:

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

01535634542

Buyer ALISON RYR TAYLOR

Telephone 01243 788122

Email alison.taylor9@nhs.net

RYR WOR BEEDING WARD H26622

Deliver to:

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

Invoice to:

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

GLN:

Order Number

342055866

Date

11-JAN-22

Any queries regarding this purchase order, please email wshnt.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)	12-JAN-22	43.70	43.70
1 BOX 20		1114006	PREEMIE EYEMAX 2 (26CM - 32CM) (CN:CQ:VIAM/06/20)	12-JAN-22	40.75	40.75

Total Value of Order (Exc VAT)

84.45

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.