



PURCHASE ORDER

990118404

Order Date: 03-May-2022

Supplier No: 003442

Supp Name: VIAMED

Address: 15 STATION ROAD
CROSSHILLS
KEIGHLEY
WEST YORKSHIRE
BD20 7DT

Supp Telephone: 01535 634542

Delivery Address: R/D RECEIPT AND DELIVERY POINT-WGH
NB ACCESS VIA VICARAGE RD ONLY
WATFORD GENERAL HOSPITAL
VICARAGE ROAD
WATFORD
DELIVERIES BETWEEN 8AM-1PM
WD18 0HB

Queries Contact: West Herts Hospitals Procurement

Telephone Number: 01707 356169

Order Queries Please Contact: westherts.buyingteam@nhs.net

Telephone Extension:

Invoice To: WEST HERTS HOSPITALS NHS TRUST
FINANCE DEPT
WILLOW HOUSE
VICARAGE ROAD
WATFORD
HERTS
WD18 0HB

Email address for invoices and invoice queries: westherts.accountspayable@nhs.net

Requisitioner Name: ESTEFANIA DA SILVA FONSECA

Requisition No/Web Ref: WEB0199121

Requisitioning Point: QH3005-KATHERINE WARD-MATERNITY-WGH

| <u>Line Number</u> | <u>Product Code</u> | <u>Product Description</u> | <u>Contract</u> | <u>Order</u> | <u>VAT</u> | <u>Delivery Date</u> |
|--------------------|---------------------|---|-----------------|-----------------------------------|---|----------------------|
| | | | <u>Code</u> | <u>Unit of</u> <u>Purchase</u> | <u>Order</u> <u>Unit</u> <u>Order</u> <u>Price</u> <u>Value</u> | <u>Rate</u> |
| 001 | 1114005 | 1114005 EyeMax2 Phototherapy Eye - Regular 32 - 38cm | | 20 | 1.00 43.70 43.70 20.00 | 04-May-2022 |
| | | | | | | 43.70 |

A copy of our Terms and Conditions is available on request

Purchase order acknowledgements / confirmations / queries to wherts-tr.buyingteam@nhs.net

All delivery notes and invoices associated with this purchase order must quote the purchase order number