## Purchase Order Number: 200413944

Please quote the Purchase Order Number on all correspondence. Payment will not be made without a valid P.O number.



**NHS Trust** 

11.00

66.00

### Supplier:

00,

VIAMED 15 STATION ROAD CROSS HILLS KEIGHLEY WEST YORKSHIRE

BD20 7DT

Telephone: 01535 634542

1.00

#### **Deliver To:**

MEBS, Delivery Point 2 FM Building University Hospital Clifford Bridge Rd Coventry CV2 2DX

Delivery Arrangements Tel: 02476 968392

### Invoice To:

FINANCE DEPARTMENT

University Hospitals of Coventry and Warwickshire NHS Trust.

0.00

Clifford Bridge Road,

55.00

Coventry,

CV2 2DX

Email: accounts.payable@uhcw.nhs.uk

#### Order Date: Required by Date: **Ordering Department:** Notes to Supplier: **UCP016 DELIVER TO MEBS - FM BUILDING** 04-May-2022 13-May-2022 CONTACT PAUL JAMES 02476968386 Biomedical Engineering Quantity **VAT Amount** Line No. Unit of Description **Suppliers** Contract **Unit Price Discount** Line Value Purch Part No: Reference:

SERVICE/CALIBRATION OF FOETAL HEART SIMULATOR V1000 AS PER QUOTATION NO. QVM136769 DATED 29.04.22

# Contact in case of query :

Buyer Name : Clare Shine

Telephone No:

Fax No: 02476 968 417

Email: supplies@uhcw.nhs.uk

NHS Terms and conditions apply, a copy of which are available on request.

Page 1 of 1

VAT Excl Total: 55.00

VAT Total: 11.00

Total Order Value : 66.00