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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------------|--------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|----------------|-----------------------------|--|-------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Supplier:</b> VIAMED LTD<br>15 STATION ROAD<br>CROSS HILLS<br>KEIGHLEY<br>BD20 7DT<br><br>GLN:                                                                                                                                  |                                                                                | <b>Deliver To:</b> TK1319 P.A.H. NEO NATAL UNIT D LEV<br>GENERAL STORES LEVEL B CENTRE BLOCK<br>SOUTHAMPTON GENERAL HOSPITAL- TREMONA ROAD<br>SOUTHAMPTON<br>HAMPSHIRE<br>SO16 6YD<br>UNITED KINGDOM | <table><tr><td><b>Order Number</b></td><td><b>P10240117</b></td></tr><tr><td><b>Date</b></td><td>10-JUN-2022</td></tr><tr><td><b>UHS EORI Number</b></td><td>XI654942706000</td></tr></table> | <b>Order Number</b> | <b>P10240117</b> | <b>Date</b>                                                                    | 10-JUN-2022                                                                                                                                                                                                | <b>UHS EORI Number</b> | XI654942706000 |                             |  |                         |                        |                                                                                                                                                                          |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Order Number</b>                                                                                                                                                                                                                | <b>P10240117</b>                                                               |                                                                                                                                                                                                      |                                                                                                                                                                                               |                     |                  |                                                                                |                                                                                                                                                                                                            |                        |                |                             |  |                         |                        |                                                                                                                                                                          |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Date</b>                                                                                                                                                                                                                        | 10-JUN-2022                                                                    |                                                                                                                                                                                                      |                                                                                                                                                                                               |                     |                  |                                                                                |                                                                                                                                                                                                            |                        |                |                             |  |                         |                        |                                                                                                                                                                          |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>UHS EORI Number</b>                                                                                                                                                                                                             | XI654942706000                                                                 |                                                                                                                                                                                                      |                                                                                                                                                                                               |                     |                  |                                                                                |                                                                                                                                                                                                            |                        |                |                             |  |                         |                        |                                                                                                                                                                          |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <table><tr><td><b>Buyer:</b></td><td>RHM BUYER</td></tr><tr><td><b>Telephone:</b></td><td></td></tr><tr><td><b>Email:</b></td><td><a href="mailto:UHSbuyingteam@wpl.uhs.nhs.uk">UHSbuyingteam@wpl.uhs.nhs.uk</a></td></tr></table> | <b>Buyer:</b>                                                                  | RHM BUYER                                                                                                                                                                                            | <b>Telephone:</b>                                                                                                                                                                             |                     | <b>Email:</b>    | <a href="mailto:UHSbuyingteam@wpl.uhs.nhs.uk">UHSbuyingteam@wpl.uhs.nhs.uk</a> | <table><tr><td><b>Requester Name:</b></td><td>Biffin, Luke</td></tr><tr><td><b>Requester Telephone:</b></td><td></td></tr><tr><td><b>Requester Email:</b></td><td>luke.biffin@uhs.nhs.uk</td></tr></table> | <b>Requester Name:</b> | Biffin, Luke   | <b>Requester Telephone:</b> |  | <b>Requester Email:</b> | luke.biffin@uhs.nhs.uk | <table><tr><td><b>Invoice To:</b> FINANCE DEPT (RHM)<br/>SOUTHAMPTON GENERAL HOSPITAL<br/>TREMONA ROAD<br/>SOUTHAMPTON<br/>SO16 6YD<br/>UNITED KINGDOM</td></tr></table> | <b>Invoice To:</b> FINANCE DEPT (RHM)<br>SOUTHAMPTON GENERAL HOSPITAL<br>TREMONA ROAD<br>SOUTHAMPTON<br>SO16 6YD<br>UNITED KINGDOM | <p><b>Terms &amp; Conditions</b></p> <p>1) Alterations to this order are not permitted without prior agreement of the trust and must be confirmed in writing.</p> <p>2) All deliveries must be accompanied or preceded by an advice / delivery note.</p> <p>3) Deliver to: (location) must be clearly labelled on outer packaging</p> <p>4) The official order number must be quoted on all documents relating to this order.</p> <p>5) All goods MUST be signed for by Goods-In operatives and will be done so 'unchecked'. Goods left without the obtainment of Goods-In operatives signature will result in invoices being returned to the supplier unpaid in the event of disputed delivery.</p> <p>6) This order is subject to standard NHS Terms and Conditions unless otherwise stated. Copies available on request.</p> <p>7) Control of Substances Hazardous to health (COSHH) - a full material data sheet must be forwarded for each product on the first order - or on request of an authorized officer.</p> <p>8) Order is conditional on all Medical Devices being CE Marked in compliance with directive 93/42/EEC or other as determined by the UK MRHA.</p> <p>9) Payment terms 30 days net unless otherwise agreed.</p> <p>10) Invoices must be sent electronically via email to: <a href="mailto:effu.fin.invoices@workflow.mail.em3.oraclecloud.com">effu.fin.invoices@workflow.mail.em3.oraclecloud.com</a></p> <p>11) For full T&amp;Cs please visit: <a href="http://www.uhs.nhs.uk/procurement/Terms-and-conditions.aspx">http://www.uhs.nhs.uk/procurement/Terms-and-conditions.aspx</a></p> |
| <b>Buyer:</b>                                                                                                                                                                                                                      | RHM BUYER                                                                      |                                                                                                                                                                                                      |                                                                                                                                                                                               |                     |                  |                                                                                |                                                                                                                                                                                                            |                        |                |                             |  |                         |                        |                                                                                                                                                                          |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Telephone:</b>                                                                                                                                                                                                                  |                                                                                |                                                                                                                                                                                                      |                                                                                                                                                                                               |                     |                  |                                                                                |                                                                                                                                                                                                            |                        |                |                             |  |                         |                        |                                                                                                                                                                          |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Email:</b>                                                                                                                                                                                                                      | <a href="mailto:UHSbuyingteam@wpl.uhs.nhs.uk">UHSbuyingteam@wpl.uhs.nhs.uk</a> |                                                                                                                                                                                                      |                                                                                                                                                                                               |                     |                  |                                                                                |                                                                                                                                                                                                            |                        |                |                             |  |                         |                        |                                                                                                                                                                          |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Requester Name:</b>                                                                                                                                                                                                             | Biffin, Luke                                                                   |                                                                                                                                                                                                      |                                                                                                                                                                                               |                     |                  |                                                                                |                                                                                                                                                                                                            |                        |                |                             |  |                         |                        |                                                                                                                                                                          |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Requester Telephone:</b>                                                                                                                                                                                                        |                                                                                |                                                                                                                                                                                                      |                                                                                                                                                                                               |                     |                  |                                                                                |                                                                                                                                                                                                            |                        |                |                             |  |                         |                        |                                                                                                                                                                          |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Requester Email:</b>                                                                                                                                                                                                            | luke.biffin@uhs.nhs.uk                                                         |                                                                                                                                                                                                      |                                                                                                                                                                                               |                     |                  |                                                                                |                                                                                                                                                                                                            |                        |                |                             |  |                         |                        |                                                                                                                                                                          |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Invoice To:</b> FINANCE DEPT (RHM)<br>SOUTHAMPTON GENERAL HOSPITAL<br>TREMONA ROAD<br>SOUTHAMPTON<br>SO16 6YD<br>UNITED KINGDOM                                                                                                 |                                                                                |                                                                                                                                                                                                      |                                                                                                                                                                                               |                     |                  |                                                                                |                                                                                                                                                                                                            |                        |                |                             |  |                         |                        |                                                                                                                                                                          |                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

**Note to the Supplier:**

| Line Number                    | Supplier Item                   | Description                     | UHS Reference Number | GTIN | Lot/Serial Number | Delivery Date | Currency | U.O.M | Quantity Required | Unit Price Inc Discount | Line Value |
|--------------------------------|---------------------------------|---------------------------------|----------------------|------|-------------------|---------------|----------|-------|-------------------|-------------------------|------------|
| 1                              | Eyemask Orange 1114006( Premie) | Eyemask Orange 1114006( Premie) |                      |      |                   | 12-Jun-22     | GBP      | PACK  | 1                 | 41.90                   | 41.90      |
| Total Value of Order (Exc VAT) |                                 |                                 |                      |      |                   |               |          |       |                   |                         | 41.90      |

**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. UHS operates a No PO, No Pay policy and any invoices not complying with these instructions will be returned unpaid to the supplier. Goods must be delivered between 08:00 and 16:00 Monday to Friday excluding Bank Holidays.