

Official Purchase Order

Order Number : 444093620

Order Date : 28 Jun 2022

All goods MUST be delivered to the address stated within the purchase order.

Any deliveries to Kings Mill Hospital Goods Receipt Point - use the entrance off the A6075 at all times. Opening Times are 08:00 to 16:00 Monday to Friday.

INVOICES must be sent to the ACCOUNTS PAYABLE DEPT.

Supplier Details:	02428 VIAMED LTD 15 STATION ROAD CROSS HILLS KEIGHLEY W. YORKS BD20 7DT
Telephone No.:	01535 634542
Deliver To:	GOODS RECEIPT POINT KINGS MILL HOSPITAL MANSFIELD ROAD SUTTON IN ASHFIELD NOTTS NG17 4JL
Invoice To:	FINANCE DEPARTMENT KINGS MILL HOSPITAL MANSFIELD ROAD SUTTON IN ASHFIELD NOTTS NG17 4JL
In case of Query please contact:	WEB BUYER 01623 622515 EXT 4242
Requisition Point Description:	NEONATAL INTENSIVE CARE UNIT
Paper / Web Ref:	
Requisition Number:	000169215

Line No.	Product Details	Order			Deliver By	Contract Reference	For Trust Internal Use
		Quantity	Price Excl VAT	Value Excl VAT			
001	3810000.VIAMED PULSE OXIMETRY POSY WRAP WITH ID BAND 20 BOXES PLEASE BOX OF 20	20	17.45	349.00	27 Jun 2022	PUR485/0001	WP06283240300
002	1114005.VIAMED EYEMAX 2 NEONATAL PHOTOTHERAPY MASK - REGULAR - PACK OF 20 BOX OF 20	3	43.70	131.10	27 Jun 2022	PUR485/0003	WP06283240300
003	1114005.VIAMED EYEMAX 2 NEONATAL PHOTOTHERAPY MASK - REGULAR - PACK OF 20 BOX OF 20	3	43.70	131.10	27 Jun 2022	PUR485/0003	WP06283240300
				611.20			

Terms and Conditions

All orders are placed against NHS Terms and Conditions. To view a copy, please use the above link to visit the DoH website.