Uniting AgeWell Limited

Level 6 Wesley Place 130 Lonsdale St Melbourne VIC 3000

Phone: 03 9133 5001

Email: purchasing@unitingagewell.org



PURCHASE ORDER

Order: PU064165

Cost Centre: 550 Date: 05/08/2025 Creditor No: 105249 Delivery Required by 11/08/2025 **UA Contact:** Mia Zhang Email: mzhang3@unitingagewell.org

Phone:

DELIVER TO:

Kun Yoon 5/90 Victoria Crescent

Mont Albert Mont Albert Vic

TO:

Tania Rendle Massage Therapy 53 A Strabane Ave Mont Albert North VIC 3129

Attention: Tania Rendle tantroy@optusnet.com.au

Line Description No.	Unit	Qty	Unit Price	Line Value
Remedial Massage once per fortnight. The amount on this PO is based on an estimation of annual expenditure.	EACH	1	4,160.00	4,160.00
	Order Total (exc GST) \$			4,160.00

Order Comments / Delivery Instructions:

Client has transferred her HCP from Annecto to UAW. Client would like to continue with fortnightly 1-hour remedial massage, and UAW HCP will take over the payments.

Please provide a progress note every 3-month or so.

To make an appointment, please contact the daughter Oak via email: oaktree187@aol.com

Care plan goal: To reduce my falls risk, manage bodily pains and to ensure mobility safety needs, by access allied health services.

IMPORTANT:

- Supply of this order is in accordance with prices, terms and specifications as listed above
- The supply of the goods and services specified in this order signifies your unreserved acceptance of, and is in accordance with the Uniting AgeWell Limited standard Terms & Conditions that can be found here

https://www.unitingagewell.org/get-involved/supply-to-us/supplier-terms-and-conditions

- Please notify immediately if you are not able to fulfil this order as specified, including quantity and delivery date
- The Purchase Order AND Cost Centre numbers MUST appear on all related correspondence, shipping documentation and invoices.

Please ensure that your organization's information in the header of this Purchase Order is correct. To avoid delays in payments, any changes must be reported as soon as practicable to Contracts@unitingagewell.org

Email Invoices to: Invoices.ua@unitingagewell.org

All invoices must be in a PDF format

Purchase Order No. PU064165 and Cost Centre 550 MUST be referenced on the invoice

All invoices must be in the name of Uniting AgeWell Limited

TERMS: Net 30 days

For any queries in relation to this Purchase Order, please contact the person listed in the header above.