

Order Date : 19-10-2022

Order No : **233279285**

Must be quoted on all correspondence.

Deliver To :**MAIN STORES****HINCHINGBROOKE HOSPITAL****HINCHINGBROOKE PARK****HUNTINGDON****PE29 6NT****GB**

Requested delivery date: 21-10-2022

Location ID: RGN9071 - HOLLY WARD

Invoice and Payment Enquiries To

NORTH WEST ANGLIA NHS FT

RGN PAYABLES 7455

PHOENIX HOUSE, TOPCLIFFE LANE

WAKEFIELD

WF3 1WE

GB

Tel: 0303 123 1177

All enquiries regarding this order to:

Contact : RGN THOMAS SUNNY, LOVIN

Telephone : 01480 418775

Facsimile No. :

Email Address : lovin.thomassunny@nhs.net

Supplier**Viamed Ltd**

Customer's Supplier Name:

VIAMED LTD

Conditions

THIS ORDER IS SUBJECT TO STANDARD NHS TERMS AND CONDITIONS. IF PRICES STATED ON THIS ORDER ARE INCORRECT ANY REVISED PRICES MUST BE AUTHORISED BY THE BUYER PRIOR TO ORDER EXECUTION. PAYMENT WILL BE MADE AT THE PRICES STATED HEREIN. DO NOT ASSIGN THIS ORDER SPECIAL INSTRUCTIONS.

Line	Goods or Services Required	Quantity	UOM	Contract Ref.	Unit Price	Line Value	VAT
1	1114005 Eye max phototherapy mask Pack 20	1	PACK		£69.00	£69.00	-

Net Total : **£69.00**

Carriage : -

Tax : -

Total : **£69.00**