

Deliver To :

**RECEIPT & DISTRIBUTION CENTRE
WHISTON HOSPITAL
STONEY LANE ENTRANCE
PRESCOT
MER**

L35 5DR

GB

Requested delivery date: 13-01-2023

Location ID: RBN007E WARD 3F

Invoice and Payment Enquiries To

ST. HELENS&KNOWSLEY HOSPITALS NHS
TRUST

RBN PAYABLES B225

PHOENIX HOUSE, TOPCLIFFE LANE

WAKEFIELD

WF3 1WE

GB

Tel: 0303 123 1177

All enquiries regarding this order to:

Contact : RBN ORCHARD, ANNEMARIE

Telephone :

Facsimile No. :

Email Address : annemarie.orchard@sthk.nhs.uk

Warning : **Order line comments require attention. Please
process manually.**

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 MASK2 REGULAR EYE MASK 2 REGULAR 1114005 carriage £10.00 Price confirmed Aqid	1	PACK 20		£48.00	£48.00	-
2	1114006 EYE MASK2 PREMI EYE MASK 2 PREMI 1114006	1	PACK 20		£46.00	£46.00	-

Net Total : **£94.00**

Carriage : -

Tax : -

Total : **£94.00**