

Order Date : 30-01-2023

Order No : 333155488

Must be quoted on all correspondence.

Deliver To :**RECEIPT AND DISTRIBUTION
ROYAL SURREY COUNTY HOSPITAL
EGERTON ROAD
GUILDFORD****GU2 7XX****GB**

Requested delivery date: 31-01-2023

Location ID: MA2185V SHERE WARD (V) (IMS)

Invoice and Payment Enquiries To**HEALTHCARE PARTNERS LIMITED****MA2 PAYABLES F755****PO BOX 312****LEEDS****LS11 1HP****GB**

Tel: 0303 123 1177

All enquiries regarding this order to:

Contact : MA2 HPL, CPA

Telephone :

Facsimile No. :

Email Address : rsch.hplcpa@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 EYEMAX 2 NEONATAL PHOTOTHERAPY MASK REG	1	PACK 20	333000069	£42.50	£42.50	-

Net Total : £42.50

Carriage : -

Tax : -

Total : £42.50