gether support solutions

## **COPY PURCHASE ORDER NUMBER: 40046603**

Please quote this reference on all correspondence

## Emailed To: orders@viamed.co.uk

1	
	VIAMED LTD
	15 STATION ROAD
	CROSS HILLS
	KEIGHLEY
	W YORKS
	BD20 7DT
- 1	

Order Date Cost Centre	31/07/2023
Requisition Number	939540
Requisition Point	3116 - WHH PADUA WARD MM**

## **Delivery Address:**

MAIN STORES
WILLIAM HARVEY HOSPITAL
KENNINGTON ROAD

ASHFORD
KENT
TN24 OLZ

## Invoice To:

2GETHER SUPPORT SOLUTIONS LTD
PAYMENTS DEPARTMENT
TRUST OFFICES
KENT & CANTERBURY HOSPITAL
ETHELBERT ROAD
CANTERBURY, KENT
CT1 3NG

Email: ekfc.payables-2ss@nhs.net

Your Reference:

If you have any queries regarding the prices quoted, please contact Procurement on Tel. 01233 651957.

Failure to invoice agreed or contract prices may result in delayed payment

DESCRIPTION	МРС	QUANTITY	UNIT	PRICE	DISC %	AMOUNT
MASK EYE PHOTOTHERAPY ORANG	1114006	1	PACK 20	55.30		55.30

Signed:

(, lynn

Managing Director

Order Total (ex VAT) 55.30
VAT Total 11.06
Order Grand Total 66.36