VAT No. GB 297 8726 29



PURCHASE ORDER NUMBER: 40047071

Please quote this reference on all correspondence

Emailed To: orders@viamed.co.uk

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

Order Date Cost Centre Requisition Number	09/08/2023 945106
Requisition Point	3110 - WHH NEONATAL INTENSIVE CARE
	UNIT MM

Delivery Address:

MAIN STORES
WILLIAM HARVEY HOSPITAL
KENNINGTON ROAD

ASHFORD
KENT
TN24 0LZ

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	48.00		48.00

Signed:

(lyly

Managing Director

Order Total (ex VAT) 48.00

VAT Total 9.60

Order Grand Total 57.60