

**Deliver To :**  
**STORES RECEIPT CENTRE**  
**ORMSKIRK DISTRICT GENERAL HOSPITAL**  
**WIGAN ROAD**  
**ORMSKIRK**  
**L39 2AZ**  
**GB**  
Requested delivery date: 13-08-2024  
Location ID: RBN1181 NEO-NATAL SUITE LEVEL 3  
ODGH

**Invoice and Payment Enquiries To**  
MERSEY AND WEST LANCASHIRE TEACHING  
HOSPITALS NHS TRUST  
RBN PAYABLES B225  
PO BOX 312  
LEEDS  
LS11 1HP  
GB  
Tel: 0303 123 1177

All enquiries regarding this order to:  
Contact : RBN ROWE, TOM  
Telephone : 01704 705199  
Facsimile No. :  
Email Address : tom.rowe@merseywestlancs.nhs.uk

**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	1114006 EYEMAX 2 NEONATAL PHOTOTHERAPY MASK - PREMIE G30 20	1	PACK 20	135437414	£55.30	£55.30	-

Net Total : £55.30  
Carriage : -  
Tax : -  
Total : £55.30