Isle of Man Government
Reiltys Ellan Vannin

1053996

OFFICIAL ORDER FORM

Ferrym-Oardrail Oikoil

Supplier:

Name: VIAMED

Address:

Post Code: E-mail:

Delivery Address:

Name:

Address: EBME Department
Nobles Hospital
Strang
Braddan
Isle of Man
IM4 4RJ Post Code:

E-mail:

Invoice Address:

Name: Department of Infrastructure

Address: Public Estates and Housing Division
Hills Meadow
Peel Road
Douglas Post Code: IM1 5FB

E-mail:

Please supply the under mentioned goods or services:	QTY	Unit Price	Total Price	Item Code	Cost Centre
OXYGEN CELL MAX-125M WITH PART No. 01104468 PLUS CARRIAGE FOR 10M	9	94.40	849.6	0110468	02-04-N0647-00
		Carriage	*		
		Discount			
		Order **TOTAL** (excl. VAT)	£ 849 p 60 PLUS CARRIAGE		

Date: 7/2/25

FO MY LAUE Signature:

Print Name: M HIGGINS

STAYD OKOIL/Grade: EBME

To secure prompt payment these instructions should be carefully followed:

(i) Quote the above Order Form number on your Invoice

(ii) Send a separate invoice for each order addressed as shown in the right - hand panel immediately the order has been completed. A separate monthly statement is not required.

(iii) Payment may be refused if goods or services are supplied without an official order or are not in accordance with the order.

(iv) Retain this order until the invoice has been paid.

(v) The purchase is subject to Standard Terms and Conditions for the Purchase of Goods/Services