Purchase Order No. RNNN400263311	**Rev No.** 0	**Page 1** of **2**
Date of Order 10-APR-2025	**Revision Date**	

North Cumbria Integrated Care NHS Foundation Trust

Supplier:
Viamed Ltd
15 Station Road
Cross Hills
Keighley
BD20 7DT
Tel:

Deliver To:
Receipt & Distribution
Cumberland Infirmary
Newtown Road
Carlisle
CA2 7HY
United Kingdom

Invoice To:
North Cumbria Integrated Care NHS
Foundation Trust
Accounts Payable
Parkhouse Building
Kingmoor Park
Baron Way
CARLISLE
CA6 4SJ
United Kingdom
Tel: 5055231100871
Email: accounts-payable@ncic.nhs.uk

Enquiries To:
Purchasing Team
CIC Procurement
Cumberland Infirmary, Newtown Road

Carlisle
CA2 7HY
Tel: 01524 511910
Email: ncicpurchasing@mbht.nhs.uk

Important Information:
1. This order is subject to the NHS Terms and Conditions for the Supply of Goods and the Provision of Services 2014, available at www.gov.uk/dh.
2. Any price alterations must be agreed with the Buyer prior to order execution.
3. The above order number must be quoted on all invoices, delivery notes and other correspondence. A delivery note must accompany each consignment of goods.
4. Goods will be received only between 08:00 and 16:00 hrs Monday to Thursday and 08:00 and 15:30 hrs on Friday. REQUIRED DELIVERY DATE/TIME - Deliveries to be received no later than date shown - Any costs incurred by the Trust as a consequence of late delivery will be recharged.

Line No.	Product Code	Description of Goods or Services	Qty	Unit of Measure / QOM	Unit Price	Line Total	Deliver by Date	Contract/Quote Reference
1	1114016	**1114016 NEOMASK PHOTOTHERAPY EYE MASK MEDIUM - PACK 20** Note:	1	PK 20	46.000	46.00	16/04/2025	NCIC/24/184/LB
2	1114015	**1114015 NEOMASK PHOTOTHERAPY EYE MASK LARGE - PACK 20** Note:	1	PK 20	46.000	46.00	16/04/2025	NCIC/24/184/LB

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Line No.	Product Code	Description of Goods or Services	Qty	Unit of Measure / QOM	Unit Price	Line Total	Deliver by Date	Contract/Quote Reference
					Total GBP:	**92.00**		

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