

# PURCHASE ORDER

Dorset County Hospital 

NHS Foundation Trust

Williams Avenue

Dorchester

Dorset

DT1 2JY

P.O. Queries: [supplies@dchft.nhs.uk](mailto:supplies@dchft.nhs.uk)

Invoice Queries: [payables@dchft.nhs.uk](mailto:payables@dchft.nhs.uk)

Supplier
VIAMED 15 STATION ROAD CROSS HILLS KEIGHLEY WEST YORKSHIRE BD20 7DT

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DCH DISTRIBUTION HUB (G7)  
HAMPTON FARM BUSINESS PARK  
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DT2 8QH

Order Date	Supplier Number	Order Number	Reprint
13/08/25	977	MM37428	

Supplier Product Code	Description	Required By	Qty	UOM	Unit Price	Nett Price
1114005	EYEMAX 2 PHOTOTHERAPY MASK 32-38CM	20/08/25	1.00	Box of 12	56.70	56.70
CARRIAGE	CARRIAGE	13/08/25	1.00	EACH	10.00	10.00

### Conditions of supply

The purchase order number (MM37428) must appear on all packages, invoices, shipping papers and correspondence. Packing slips must accompany all shipments. Stores opening times 0830 - 1600 Monday to Friday (except Bank Holidays). Warehouse opening times 0830 - 1500, Monday to Friday. This order is subject to the NHS Terms and Conditions for the Supply of Goods and the Provision of Services (Purchase Order Version) (February 2025) a copy can be obtained on application to the Purchasing Manager.

## Nett

66.70

**VAT**

13.34

**Total Value**

80.04