VAT No. GB 297 8726 29



PURCHASE ORDER NUMBER: 40078274

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	01/10/2025
	242452
Requisition Number	340152
Requisition Point	3110 - WHH NEONATAL INTENSIVE CARE
	UNIT MM

Delivery Address:

MAIN STORES
WILLIAM HARVEY HOSPITAL
KENNINGTON ROAD
ASHFORD
KENT
TN24 OLZ

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

				<u> </u>		
DESCRIPTION	MPC	QUANTITY	UNIT	PRICE	DISC %	AMOUNT
MASK EYE PHOTOTHERAPY BLUE	1114005	1	PACK 20	56.70		56.70
MASK EYE PHOTOTHERAPY GREEN	1114007	1	PACK 20	56.70		56.70
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Signed:

(lyly)

Managing Director

Order Total (ex VAT) 113.40

VAT Total 22.68

Order Grand Total 136.08