

## PURCHASE ORDER NUMBER: 40081926

Please quote this reference on all correspondence

Emailed To: [orders@viamed.co.uk](mailto:orders@viamed.co.uk)

VIAMED LTD 15 STATION ROAD CROSS HILLS KEIGHLEY W YORKS BD20 7DT	Order Date Cost Centre Requisition Number Requisition Point	07/01/2026 380306 3116 - WHH PADUA WARD MM**
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Delivery Address:

MAIN STORES WILLIAM HARVEY HOSPITAL KENNINGTON ROAD ASHFORD KENT TN24 0LZ
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Invoice To:

2GETHER SUPPORT SOLUTIONS LTD PAYMENTS DEPARTMENT TRUST OFFICES KENT & CANTERBURY HOSPITAL ETHELBERT ROAD CANTERBURY, KENT CT1 3NG
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Email: [ekfc.payables-2ss@nhs.net](mailto: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**

DESCRIPTION	MPC	QUANTITY	UNIT	PRICE	DISC %	AMOUNT
MASK EYE PHOTOTHERAPY BLUE	1114005	1	PACK 20	56.70		56.70
MASK EYE PHOTOTHERAPY ORANG	1114006	1	PACK 20	56.70		56.70

Signed:



Managing Director

Order Total (ex VAT)	113.40
VAT Total	22.68
Order Grand Total	136.08

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<https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services>