

# 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

**Deliver To / Execute Work At**  
DCH DISTRIBUTION HUB (G7)  
HAMPTON FARM BUSINESS PARK  
BOCKHAMPTON LANE  
HIGHER BOCKHAMPTON  
DORCHESTER, DORSET  
DT2 8QH

Order Date	Supplier Number	Order Number	Reprint
24/03/26	977	MM38125	

Supplier Product Code	Description	Required By	Qty	UOM	Unit Price	Nett Price
1114005	EYEMAX 2 PHOTOTHERAPY MASK 32-38CM	31/03/26	1.00	Box of 12	56.70	56.70
CARRIAGE	CARRIAGE	24/03/26	1.00	EACH	10.00	10.00

**Conditions of supply**

The purchase order number (MM38125) 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.

<b>Nett</b>	<b>66.70</b>
<b>VAT</b>	<b>13.34</b>
<b>Total Value</b>	<b>80.04</b>