



The Dudley Group
NHS Foundation Trust

Deliver to/Execute Work at: Invoice/Payment Queries to

PROCUREMENT DEPARTMENT
THE DUDLEY GROUP NHS FT
RUSSELLS HALL HOSPITAL
DUDLEY

DY1 2HQ

THE DUDLEY GROUP NHS FT
FINANCE DEPARTMENT
TRUST HEADQUARTERS
RUSSELLS HALL HOSPITAL
DUDLEY WEST MIDS DY1 2HQ
EMAIL DGFT.PAYMENTS@NHS.NET

Supplier Name & Address:

VIAMED
15 STATION ROAD
CROSS HILLS
KEIGHLEY
WEST YORKSHIRE

BD20 7DT

Official Order no 140011217

Order date 11/06/2026

Fax to: 01535 635582

Page 1 of 2

| Line No | Order Qty | Unit Of Purchase | NSV Code | Description | Unit Price exc Discount & VAT | Discount Amount | Value excl VAT |
|---------|-----------|------------------|----------|-------------|-------------------------------|-----------------|----------------|
|---------|-----------|------------------|----------|-------------|-------------------------------|-----------------|----------------|

| | | | | | | | |
|-----|------|--|--|--|-------|---|--------|
| 001 | 2.00 | | | PRODUCT CODE: 1114006 REF NUMBER: R300P02 MAXTEC EYEMAX PHOTOTHERAPY MASK . SIZE: PREEMIE COLOUR: ORANGE . UNIT OF ISSUE = 20 | 58.90 | 0 | 117.80 |
| 002 | 2.00 | | | PRODUCT CODE: 1114005 REF NUMBER: R300PO1 MAXTEC EYEMAX PHOTOTHERAPY MASK . | 58.90 | 0 | 117.80 |

Conditions of Order

1. This Purchase Order is placed with your organisation subject to the application of our terms and conditions as referred to in the Department of Health's "Applicable Contract Terms Policy". Copies available at: <https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services>
2. Payment terms are 30 days from the receipt of an invoice. Providing the goods or services listed on this purchase order will be considered acceptance of these terms.
3. The above Official Order Number must be quoted on all advice notes, delivery notes, invoices, acknowledgements, correspondence etc.
4. Goods will be received between 08.00am and 15.45pm Monday to Friday except Bank Holidays.
5. All invoices must be sent to the address indicated above and any invoices not quoting the Official Order Number will be returned to the Supplier.
6. Suppliers should adhere to our Supplier Code of Conduct (available on our website).

Signed: 
ON BEHALF OF:
THE DUDLEY GROUP NHS FOUNDATION TRUST



The Dudley Group
NHS Foundation Trust

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|--|--|
| PROCUREMENT DEPARTMENT THE DUDLEY GROUP NHS FT RUSSELLS HALL HOSPITAL DUDLEY DY1 2HQ | THE DUDLEY GROUP NHS FT FINANCE DEPARTMENT TRUST HEADQUARTERS RUSSELLS HALL HOSPITAL DUDLEY WEST MIDS DY1 2HQ EMAIL DGFT.PAYMENTS@NHS.NET |

| Supplier Name & Address: |
|--|
| VIAMED 15 STATION ROAD CROSS HILLS KEIGHLEY WEST YORKSHIRE BD20 7DT |

| | | |
|--------------------------|---------------------|-------------|
| Official Order no | 140011217 | Page 2 of 2 |
| Order date | 11/06/2026 | |
| Fax to: | 01535 635582 | |

| Line No | Order Qty | Unit Of Purchase | NSV Code | Description | Unit Price exc Discount & VAT | Discount Amount | Value excl VAT |
|--------------------------|-----------|------------------|----------|--|-------------------------------|-----------------|----------------|
| 003 | 1.00 | EACH | CARRIAGE | SIZE: REGULAR COLOUR: BLUE . UNIT OF ISSUE = 20 . CARRIAGE . . . PRICE AND CARRIAGE AS PER PHONE CALL WITH AQIB ON 11.6.2026 . | 10.00 | 0 | 10.00 |
| Total Order Value | | | | | | | 245.60 |

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