



Isle of Man
Government

Reillys Eilan Vannin

OFFICIAL ORDER FORM

Ferryman-Oardrail Oikoil

869924

Supplier:

Name: HUMAN MED UK LTD
Address: 15 STATION ROAD, CROSS HILLS, KEIGHLEY
Post Code: BD20 7DT E-mail: _____

Delivery Address:

Name: Department of Infrastructure
Public Estates & Housing Division
Address: Nobles Hospital
Strang
Braddan
Isle of Man
IM4 4RJ Post Code: _____
E-mail: _____

Invoice Address:

Name: Department of Infrastructure
Public Estates & Housing Division
Address: Peregrine House
Peel Road
Douglas
Isle of Man
IM1 4EH Post Code: _____
E-mail: _____

Please supply the under mentioned goods or services:

AS PER QUOTE TL03022020-1

ANNUAL SERVICE, CALIBRATION
AND SAFETY TESTING OF
BODYJET LIPOSUCTION MACHINE.

PRODUCT CODE 112074
(S/N 576).

QTY	Unit Price	Total Price	Item Code	Cost Centre
1	1280 00		02-09-	N061-016
	Carriage			
	Discount			
	Order TOTAL (excl. VAT)	£ 1280 P 00		

Date: 07/02/20

FO MY LAUE Signature: _____

Print Name: C GLOVER

STAYD OKOIL/Grade: _____

To secure prompt payment these instructions should be carefully followed:

- Quote the above Order Form number on your Invoice
- Send a separate invoice for each order addressed as shown in the right - hand panel immediately the order has been completed. A separate monthly statement is not required.
- Payment may be refused if goods or services are supplied without an official order or are not in accordance with the order.
- Retain this order until the invoice has been paid.